Multiple Agency Fiscal Note Summary

Bill Number: 5700 SB Title: Health care authority

Estimated Cash Receipts

NONE

Estimated Operating Expenditures

Agency Name	2023-25			2025-27			2027-29					
	FTEs	GF-State	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Total
Department of Commerce	.0	0	0	0	.0	0	0	0	.0	0	0	0
Washington State Health Care Authority	.0	0	0	0	.0	0	0	0	.0	0	0	0
Consolidated Technology Services	.0	0	0	0	.0	0	0	0	.0	0	0	0
Department of Social and Health Services	.0	0	0	0	.0	0	0	0	.0	0	0	0
Department of Children, Youth, and Families	.0	0	0	0	.0	0	0	0	.0	0	0	0
Department of Corrections	.0	0	0	0	.0	0	0	0	.0	0	0	0
Total \$	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0

Estimated Capital Budget Expenditures

Agency Name	2023-25			2025-27			2027-29		
	FTEs	Bonds	Total	FTEs	Bonds	Total	FTEs	Bonds	Total
Department of Commerce	.0	0	0	.0	0	0	.0	0	0
Washington State Health Care Authority	.0	0	0	.0	0	0	.0	0	0
Consolidated Technology Services	.0	0	0	.0	0	0	.0	0	0
Department of Social and Health Services	.0	0	0	.0	0	0	.0	0	0
Department of Children, Youth, and Families	.0	0	0	.0	0	0	.0	0	0
Department of Corrections	.0	0	0	.0	0	0	.0	0	0
Total \$	0.0	0	0	0.0	0	0	0.0	0	0

Estimated Capital Budget Breakout

Prepared by: Jason Brown, OFM	Phone:	Date Published:
	(360) 742-7277	Revised 2/14/2023

Bill Number: 5700 SB	Title: Health care authority	Agency:	103-Department of Commerc
Part I: Estimates			
X No Fiscal Impact			
Estimated Cash Receipts to:			
NONE			
Estimated Operating Expenditure NONE	res from:		
Estimated Capital Budget Impac	t:		
NONE			
	estimates on this page represent the most likely	y fiscal impact. Factors impacting th	he precision of these estimates,
and alternate ranges (if appropriate Check applicable boxes and foll	•		
	an \$50,000 per fiscal year in the current bi	ennium or in subsequent biennia	, complete entire fiscal note
	\$50,000 per fiscal year in the current bien	nium or in subsequent biennia, co	omplete this page only (Part I)
Capital budget impact, com	plete Part IV.		
Requires new rule making,	complete Part V.		
Legislative Contact: Julie Tra	an	Phone: 360-786-7283	Date: 02/05/2023
Agency Preparation: Cecil Da	aniels	Phone: 360-725-2862	Date: 02/08/2023
Agency Approval: Jason D	avidson	Phone: 360-725-5080	Date: 02/08/2023
OFM Review: Gwen S	tamey	Phone: (360) 790-1166	Date: 02/09/2023

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

This bill modernizes health care authority related laws and requires an Interagency Agreement between Health Care Authority (HCA) and Commerce.

Section 32 (4) changes the statute to reflect an Interagency Agreement between health care authority (HCA) and department of commerce clarifying that the HCA pays a monthly amount to department of commerce to cover the costs of services provided to clients of managed care organizations (MCOs).

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

None.

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

There is no impact to the department. The activities stated in SB 5700 are already a part of the normal operating procedures within the department.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

NONE

III. B - Expenditures by Object Or Purpose

NONE

III. C - Operating FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part I and Part IIIA.

NONE

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

NONE

None.

Part V: New Rule Making Required

Bill Number: 5700 SB	Title: Health care authority	Agency:	107-Washington State Health Care Authority
Part I: Estimates		•	
X No Fiscal Impact			
Estimated Cash Receipts to:			
NONE			
Estimated Operating Expenditu NONE	res from:		
Estimated Capital Budget Impac	t:		
NONE			
The cash receipts and expenditure and alternate ranges (if appropria	estimates on this page represent the most likely	fiscal impact. Factors impacting	the precision of these estimates,
Check applicable boxes and fol			
	an \$50,000 per fiscal year in the current bie	nnium or in subsequent biennia	a, complete entire fiscal note
form Parts I-V.	\$50,000 per fiscal year in the current bienn	ium or in subsequent biennia o	omnlete this page only (Part I)
		rum of m suosequent oferma, e	ompiete this page only (1 art 1)
Capital budget impact, com	•		
Requires new rule making,	complete Part V.		
Legislative Contact: Julie Tr	an	Phone: 360-786-7283	Date: 02/05/2023
Agency Preparation: Marcia	Boyle	Phone: 360-725-0850	Date: 02/14/2023
Agency Approval: Cliff Hi		Phone: 360-725-0875	Date: 02/14/2023
OFM Review: Jason B	rown	Phone: (360) 742-7277	Date: 02/14/2023

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

See attached narrative.

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

See attached narrative.

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

See attached narrative.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

NONE

III. B - Expenditures by Object Or Purpose

NONE

III. C - Operating FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part I and Part IIIA.

NONE

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

NONE

None

Part V: New Rule Making Required

Bill Number: SB 5700 Health Care Authority HCA Request #: 23-116 Revised

Part II: Narrative Explanation

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

An act relating to modernizing the Washington State Health Care Authority's (HCA's) related laws.

Section 1 Updates language to remove "employees and school" employee and replaces it with "public" employee.

Section 2 Updates language to remove "an employee or a school" employee and replaces it with "a public" employee.

Section 3 Updates the definition of employee to include employees of the Washington state convention and trade center as provided in RCW 41.05.110. This section removes the specific dates employee organizations representing state civil service employees obtaining employee benefits through a contractual agreement with the authority to participate in benefit plans developed by the public employees' benefits board can participate. Updates language to remove "employees and school" employee and replaces it with "public" employee.

Section 4 Removes language that requires HCA on January 1, 2007, and January 1, 2009, the authority shall issue a status report to the legislature summarizing any results it attains in exploring and coordinating strategies for asthma, diabetes, heart disease, and other chronic diseases. Updates the term "administrator" to "director".

Section 5 Adds additional chapters, 71.05, 71.24, and 71.34 RCW, the director shall also appoint such professional personnel and other assistants and employees necessary to carry out the provisions of this chapter and other applicable law.

Section 6 Removes language that requires using the final health information technology report and recommendations developed under chapter 261, Laws of 2005, to coordinate a strategy for the adoption of health information technology systems. Updates language to remove "an employee or a school" employee and replaces it with "a public" employee. Updates language to remove "chemical dependency" with "substance use disorders".

Section 7 Adds language the Washington state health information technology office is located within HCA. Adds the Department of Children, Youth, and Families to the list of state agencies directed to cooperate with HCA to establish appropriate health care information systems in their programs. Requires HCA collaboration with the consolidated technology services agency.

Section 8 Updates the term "administrator" to "director" and requires the director to implement and maintain a consumer-centric health information infrastructure and the state electronic health record repositories that will facilitate the secure exchange of health information. Updates the term "banks" to "repositories" and "record banks" to "records service".

Section 9 Updates the term "administrator" to "director".

Section 10 Updates the term "administrator" to "director".

Section 11 Updates the term "qualified" to "state registered" and "employees or school" employees to "public" employees.

Prepared by: Marcia Boyle Page 1 8:59 PM 02/13/23

Bill Number: SB 5700 Health Care Authority HCA Request #: 23-116 Revised

Section 12 Updates the term "administrator" to "director".

Section 13 Removes language "and during the 2013-2015 fiscal biennium, for health care related analysis provided to the legislature by the office of the state actuary. During the 2017-2019 and 2019-2021 fiscal biennia, moneys in the account may be used for the initial operating expenses of the authority associated with chapter 13, Laws of 2017 3rd sp. sess. All funds so used shall be reimbursed from the school employees' insurance administrative account following the start of benefit provision by the school employees' benefits board on January 1, 2020".

Section 14 Updates the term "administrator" to "director".

Section 15 Updates the term "administrator" to "director".

Section 16 Updates the term "administrator" to "director".

Section 17 Updates the term "employee or school" employee and replaces it with "public" employee.

Section 18 Updates the term "administrator" to "director".

Section 19 Updates the reference to RCW 41.05.410(2)(g).

Section 20 Updates the term "administrator" to "director".

Section 21 Removes language that requires HCA to report to the legislature in December 2008 and December 2010 on outcome goals for the employee health program.

Section 22 Updates the term "administrator" to "director".

Section 23 Updates the term "administrator" to "director".

Section 24 Updates the term "administrator" to "director".

Section 25 Removes reference to RCW 70.190.010 and updates the term "administrator" to "director".

Section 26 Updates language how an order to withhold and deliver must be served with return receipt service when sent by certified mail.

Section 27 Updates the reference to RCW 74.04.005(13)(g).

Section 28 Updates language to indicate an officer shall determine the amount, if any, of the overpayment received by the vendor.

Section 29 Updates the reference to RCW 41.05.690.

Section 30 Adds language that allows HCA to create rules needed to implement this chapter.

Prepared by: Marcia Boyle Page 2 8:59 PM 02/13/23

Bill Number: SB 5700 Health Care Authority HCA Request #: 23-116 Revised

Section 31 HCA is designated as the state behavioral health authority which includes recognition as the single state authority for substance use disorders, state mental health authority, and adds state opioid treatment authority.

Section 32 Updates language to require HCA to contract with the Department of Commerce (Commerce) for the provision of behavioral health consumer advocacy services delivered to individuals enrolled in a managed care organization by the advocacy organization selected by the state office of behavioral health consumer advocacy established in RCW 71.40.030. The contract shall require HCA to reimburse the Department of Commerce for the behavioral health consumer advocacy services delivered to individuals enrolled in a managed care organization.

Section 33(12) Removes the definition for "Internal management". (13) Creates a new definition of "managed care organization" as follows: "Managed care organization" means any health care organization, including health care providers, insurers, health care service contractors, health maintenance organizations, health insuring organizations, or any other entity or combination thereof, that provides directly or by contract health care services covered under this chapter and rendered by licensed providers, on a prepaid capitated basis and that meets the requirements of section 1903(m)(1)(A) of Title XIX of the federal social security act or federal demonstration waivers granted under section 1115(a) of Title XI of the federal social security act.

Section 34 Updates language from "persons" to "individuals".

Section 35 Updates language to the legislature finds that HCA and the department purchase or contract for the delivery of Medicaid programs through contracts with providers and managed care organizations under this chapter, contractors providing behavioral health services under chapters 71.24 and 71.34 RCW, and contractors providing long-term care services under chapter 74.39A RCW. Removes the requirement that the agencies must jointly report to the health care committees and fiscal committees of the legislature by November 1, 2014, with an update on the contractual opportunities and the anticipated impacts on patient access to timely care, the impact on the availability of inpatient and outpatient services, and the fiscal implications for the Medicaid programs.

Section 36 Removes language "For the 2013-2015 fiscal biennium, moneys in the account may be spent on inpatient and outpatient rebasing and conversion to the tenth version of the international classification of diseases. For the 2011-2013 fiscal biennium, moneys in the account may be spent on inpatient and outpatient rebasing."

Section 37 Adds reference to RCW 41.05A.220 when calculating interest.

Section 38 (1)(a) revised to state: All managed care organizations contracted with the authority for the Medicaid program shall reimburse a provider for a health care service provided to a covered person through telemedicine or store and forward technology if:...; (1)(a)(i) modified terms to read "managed care organization; (1)(b)(i), (2), (4), (7) (8)(a) modified terms to read "managed care organization"; and (9)(g) to remove definition of "managed health care system".

Section 39(7)(e)-(f) Updates reference to RCW 18.71A in lieu of RCW 18.57A.

Section 40(1) Updates family income at the time of enrollment is not greater than 260 percent, previously 250 percent, of the federal poverty level as adjusted for family size and determined annually by the federal department of health and human services, and effective January 1, 2009, and only to the

Prepared by: Marcia Boyle Page 3 8:59 PM 02/13/23

Bill Number: SB 5700 Health Care Authority HCA Request #: 23-116 Revised

extent that funds are specifically appropriated therefor, to children whose family income is not greater than 312 percent, previously 300 percent, of the federal poverty level. (5)(a) Requires HCA to develop and implement a schedule of premiums for children's health care coverage to HCA from families with income greater than 210 percent, previously 200 percent, of the federal poverty level. For families with income greater than 260 percent, previously 250 percent, of the federal poverty level, the premiums shall be established in consultation with the senate majority and minority leaders and the speaker and minority leader of the house of representatives. (5)(b) Premiums shall not be imposed on children in households at or below 210 percent, previously 200 percent, of the federal poverty level as articulated in RCW 74.09.055. (5)(c) HCA must offer families whose income is greater than 312 percent, previously 300 percent, of the federal poverty level the opportunity to purchase health care coverage for their children through the programs administered under this section without an explicit premium subsidy from the state.

Section 41 Removes the reference "as provided in RCW 50.20.1202" when determining family income, eligibility, and payment levels.

Section 42 Removes the language "and improve" from practices and health plans measures.

Section 43(1)(a) Removes definition of "managed health care system". Changes term to "managed care organization" everywhere the term "managed health care system" is used in the section.

Section 44(1) updated language to state: "All Medicaid managed care organizations must..." (2) updated term to "managed care organization".

Section 45(1) updated language to state: "All Medicaid managed care organizations must..." (2) updated term to "managed care organization".

Section 46 updated language to state "All Medicaid contracted managed care organizations shall..."

Section 47 Replaces "department" with "authority" requiring HCA to design a Medicaid prescription drug assistance program. Removes expired requirements.

Section 48 Removes reference to RCW 42.32.

Section 49 Removes expired requirements for HCA to track per capita expenditures for a cohort of clients that receive smoking cessation benefits and submit a cost-benefit analysis to the legislature on or before January 1, 2012.

Section 50(3) typographical updates and (5) Expands family planning services to cover women to 260 percent, previously 250 percent, of the federal poverty level would align that program's eligibility standard with income eligibility for publicly funded maternity care service.

Section 51 Removes expired requirements for HCA by September 30, 2011, submit an application to increase income eligibility to two hundred fifty percent of the federal poverty level, to correspond with income eligibility for publicly funded maternity care services.

Section 52 Updates language to "managed care organizations".

Prepared by: Marcia Boyle Page 4 8:59 PM 02/13/23

Bill Number: SB 5700 Health Care Authority HCA Request #: 23-116 Revised

Section 53 Adds a new section that repeals the following acts or parts of acts:

- RCW 41.05.090 (Continuation of coverage of employee, spouse, or covered dependent ineligible under state plan—Exceptions)
- RCW 41.05.205 (Tricare supplemental insurance policy—Authority to offer—Rules)
- RCW 41.05.240 (American Indian health care delivery plan)
- RCW 74.09.720 (Prevention of blindness program)

Section 54 Adds a new section that decodifies:

- RCW 41.05.033 (Shared decision-making demonstration project—Preference-sensitive care)
- RCW 41.05.110 (Chapter not applicable to officers and employees of state convention and trade center)
- RCW 41.05.280 (Department of corrections—Inmate health care)
- RCW 41.05.680 (Report—Chronic care management)
- RCW 74.09.756 (Medicaid and state children's health insurance program demonstration project)

II. B - Cash Receipts Impact

No fiscal impact.

II. C - Expenditures

No fiscal impact.

Part IV: Capital Budget Impact

None

Part V: New Rule Making Require

None

Bill Number: 5700 SB	Title:	Health care authority	Agency:	163-Consolidated Technology Services
Part I: Estimates			,	
X No Fiscal Impact				
Estimated Cash Receipts to) :			
NONE				
Estimated Operating Expe NONE	enditures from:			
Estimated Capital Budget l	Impact:			
NONE				
		this page represent the most likely fisc	al impact. Factors impacting	the precision of these estimates,
and alternate ranges (if app Check applicable boxes a				
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form Parts I-V.	, than \$50,000 mag	a final year in the exament his majore	an in subsequent bismuis	complete this mass only (Dort I)
	_	r fiscal year in the current biennium	for in subsequent blennia, c	omplete this page only (Part 1)
Capital budget impac	-			
Requires new rule ma	aking, complete P	art V.		
Legislative Contact: Ju	ılie Tran		Phone: 360-786-7283	Date: 02/05/2023
Agency Preparation: C	hristina Winans		Phone: 360-407-8908	Date: 02/09/2023
Agency Approval: T	im Gallivan		Phone: (360) 407-8215	Date: 02/09/2023
OFM Review: C	heri Keller		Phone: (360) 584-2207	Date: 02/10/2023

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

SB 5700 modernizes statutes related to the work of the Health Care Authority (HCA).

Section 7 contains the only impact to Consolidated Technology Services (WaTech). It creates the Washington state health information technology office within HCA. It lists the agencies that are directed to cooperate with the authority to establish health care information systems in their various programs. HCA is directed, in conjunction with the named agencies and "in collaboration with the consolidated technology services agency," to determine the following:

- Definitions of health care services,
- Health care data elements common to all agencies,
- Health care data elements unique to each agency, and
- A mechanism for program and budget review of health care data.

This bill has no fiscal impact on WaTech. WaTech will be able to provide the required coordination by leveraging existing resources, specifically from our State Chief Data Officer (CDO) and Enterprise Architecture Team. WaTech estimates that either the CDO or a member of the Enterprise Architecture Team will spend approximately three hours a month working with partner agencies until the support, ongoing development, and refinement of the requirements noted above are met. Therefore, it is assumed, WaTech can absorb the costs for this proposed bill in its base budget if the workload of other enacted legislation does not exceed current staffing levels.

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

NONE

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

NONE

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

NONE

III. B - Expenditures by Object Or Purpose

NONE

III. C - Operating FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part I and Part IIIA.

NONE

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

NONE

Part V: New Rule Making Required

Bill Number: 5700 SB	Title:	Health care authority	Agency	300-Department of Social and Health Services
Part I: Estimates				
X No Fiscal Impact				
Estimated Cash Receipts to	:			
NONE				
Estimated Operating Experiment NONE	nditures from:			
Estimated Capital Budget I	mpact:			
NONE				
The cash receipts and expen and alternate ranges (if app		his page represent the most likely fisca ned in Part II	l impact. Factors impacting	the precision of these estimates,
Check applicable boxes ar				
If fiscal impact is great form Parts I-V.	ter than \$50,000 p	er fiscal year in the current bienniu	m or in subsequent bienni	a, complete entire fiscal note
	than \$50,000 per 1	fiscal year in the current biennium	or in subsequent biennia,	complete this page only (Part I)
Capital budget impact	, complete Part IV		-	
Requires new rule ma	-			
Legislative Contact: Ju	lie Tran		Phone: 360-786-7283	Date: 02/05/2023
Agency Preparation: Bi	ll Jordan		Phone: 360-902-8183	Date: 02/08/2023
Agency Approval: Da	an Winkley		Phone: 360-902-8236	Date: 02/08/2023
OFM Review: Ja	son Brown		Phone: (360) 742-7277	Date: 02/09/2023

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

Section 8 of the bill states that the Health Care Authority (HCA) director shall design, implement, and maintain a consumer-centric health information infrastructure and the state electronic health record repositories. It is our understanding that the electronic health record repositories refers to the Health Benefit Exchange and the data lake that is maintained by HCA.

There is no fiscal impact to the Department of Social and Health Services for this bill that updates the various laws related to HCA.

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

NONE

III. B - Expenditures by Object Or Purpose

NONE

III. C - Operating FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part I and Part IIIA.

NONE

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

NONE

Part V: New Rule Making Required

Bill Number: 5700 SB	Title:	Health care authority	Agency:	307-Department of Children, Youth, and Families
Part I: Estimates				
X No Fiscal Impact				
Estimated Cash Receipts to) :			
NONE				
Estimated Operating Experiment NONE	nditures from:			
Estimated Capital Budget I	mpact:			
NONE				
The cash receipts and expen and alternate ranges (if app.		nis page represent the most likely fiscal ed in Part II.	l impact. Factors impacting	the precision of these estimates,
Check applicable boxes ar	nd follow correspor	nding instructions:		
If fiscal impact is great form Parts I-V.	ter than \$50,000 pe	er fiscal year in the current bienniu	m or in subsequent bienni	a, complete entire fiscal note
If fiscal impact is less	than \$50,000 per f	iscal year in the current biennium	or in subsequent biennia, c	complete this page only (Part I
Capital budget impact	c, complete Part IV.			
Requires new rule ma	king, complete Par	t V.		
Legislative Contact: Ju	llie Tran		Phone: 360-786-7283	Date: 02/05/2023
Agency Preparation: Re	enee Slaybaugh		Phone: 360-688-8714	Date: 02/09/2023
Agency Approval: Sa	arah Emmans		Phone: 360-628-1524	Date: 02/09/2023
OFM Review: Ca	arly Kujath		Phone: (360) 790-7909	Date: 02/09/2023

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

Section 40(6) requires the Health Care Authority (HCA) to collaborate with DCYF and other state agencies to continue targeted outreach and education of enrolling children in health coverage and improving the health literacy of youth and parents.

Section 40(6)(c) requires use of existing systems, such as enrollment information from DCYF's childcare subsidy program and other existing programs across state agencies to identify children who may be eligible, but not enrolled in coverage.

Section 40(6)(g) requires HCA to create an implementation plan to develop online application capability linking data with the Office of the Superintendent of Public Instruction (OSPI) for free and reduced-price lunch and DCYF's childcare subsidy program enrollment information.

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

None.

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

No impact to DCYF.

DCYF assumes the work required in Section 40(6)(c) of the bill will be absorbed with the use of existing systems that are already in place for the childcare subsidy program.

DCYF also assumes the implementation and development of the data linkages between DCYF and OSPI required in Section 40(6)(g) are required by HCA and will not impact DCYF's IT Department.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures NONE

III. B - Expenditures by Object Or Purpose

NONE

III. C - Operating FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part I and Part IIIA.

NONE

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

NONE

Part V: New Rule Making Required

Bill Number: 5700 SB	Title:	Health care authority	Agency:	310-Department of Corrections
Part I: Estimates	•			
X No Fiscal Impact				
Estimated Cash Receipts to	o:			
NONE				
Estimated Operating Expe NONE	enditures from:			
Estimated Capital Budget I	Impact:			
NONE				
		this page represent the most likely fisco	al impact. Factors impacting t	the precision of these estimates,
and alternate ranges (if app Check applicable boxes as				
If fiscal impact is grea	_	per fiscal year in the current bienniu	um or in subsequent biennia	, complete entire fiscal note
form Parts I-V.	- 41 \$50,000	. C 1 : - 41 4 1 : : 1 : : - :		
	_	fiscal year in the current biennium	or in subsequent biennia, c	omplete this page only (Part I
Capital budget impac	-			
Requires new rule ma	iking, complete Pa	art V.		
Legislative Contact: Ju	ılie Tran		Phone: 360-786-7283	Date: 02/05/2023
Agency Preparation: A	manda Pierpoint		Phone: (360) 725-8428	Date: 02/06/2023
	onell Witt		Phone: (360) 725-8428	Date: 02/06/2023
OFM Review: C	ynthia Hollimon		Phone: (360) 810-1979	Date: 02/08/2023

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

Senate Bill 5700 is an act relating to modernization of state Health Care Authority (HCA) related laws, amends RCW's 41.05.006, 41.05.009, 41.05.011, 3 41.05.013, 41.05.015, 41.05.031, 41.05.035, 41.05.039, 41.05.046, 4 41.05.066, 41.05.068, 41.05.130, 41.05.160, 41.05.220, 41.05.310, 5 41.05.320, 41.05.400, 41.05.413, 41.05.520, 41.05.540, 41.05.550, 6 41.05.651, 41.05.650, 41.05.660, 41.05A.120, 41.05A.160, 41.05A.170, 7 70.320.050, 70.390.020, 71.24.380, 74.09.010, 74.09.171, 74.09.215, 8 74.09.220, 74.09.325, 74.09.328, 74.09.470, 74.09.4701, 74.09.480, 9 74.09.522, 74.09.630, 74.09.634, 74.09.645, 74.09.650, 74.09.653, 10 74.09.655, 74.09.657, and 74.09.860; reenacts and amends RCW's 41.05.021, 71.24.035, 74.09.053, and 74.09.659; decodifies RCW's 41.05.033, 41.05.110, 41.05.280, 41.05.680, and 74.09.756; and repeals RCW's 41.05.090, 41.05.205, 41.05.240, and 74.09.720.

Section 54(3) decodifies RCW 41.05.280 which states: The Department of Corrections (DOC) shall consult with the state HCA to identify how DOC shall develop a working plan to correspond to the health care reform measures that require all departments to place all state purchased health services in a community-rated, single risk pool under the direct administrative authority of the state purchasing agent by July 1, 1997.

Effective date is assumed 90 days after adjournment of session in which this bill is passed.

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

None.

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

This bill proposes changes to updates references to more modern technology and removes previous language requiring a report when the dates are no longer valid in the RCW.

We assume this bill will have no fiscal impact to DOC.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

NONE

III. B - Expenditures by Object Or Purpose

NONE

III. C - Operating FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part I and Part IIIA.

NONE

III. D - Expenditures By Program (optional)

NONE

Health care authority Form FN (Rev 1/00) 182,131.00 FNS063 Individual State Agency Fiscal Note

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

NONE

None.

Part V: New Rule Making Required