

2022 Budget and Legislation Proposals

August 2021

Agency Request Legislation

Enhance Capacity and Diversity of Health Profession Boards and Commissions

Some health profession board and commission requirements, such as membership and compensation rates, have not changed over the years to meet the demand of complex and time-consuming disciplinary matters or evolved to allow for increased diversity. This has created inconsistency and inequity in membership conditions and ability to effectively meet disciplinary and policy obligations. The Department of Health requests legislation to modify statutes to achieve consistency, allow for more diversity, and increase effectiveness of these boards and commission by expanding the size of membership and number of public members, removing membership restrictions, modifying quorum requirements and increasing compensation so all boards and commissions are reimbursed at a Class 5 rate (\$250 a day).

Allowing EMTs to provide testing and vaccines for communicable disease prevention and control

EMTs have been a critical part of the COVID response by assisting public health agencies with activities such as nasal swab testing and administration of vaccine. This was possible because of the declared state of emergency. Current law does not allow EMTs to provide medical care outside of a 911 call or while transporting a patient to an appropriate medical facility. This limits the ability for public health agencies to utilize EMTs during a public health response to reduce or prevent the spread of communicable diseases, such as COVID or influenza. This proposal allows EMTs to provide testing and vaccines for communicable diseases outside of an emergency in collaboration with local, regional, or state public health agencies.

Policy Level Funding Requests

Young Adult Behavioral Health

\$2.7 million General Fund State

Death by suicide among adolescents and transition-age is rising across Washington, even prior to the pandemic. Especially alarming is the rapid increase of suicide among young people ages 18-24. To address this growing epidemic, the department requests funding to expand and improve behavioral health screening, referral and care for youth in both academic and non-academic settings.

Sustain Child Profile Health System

\$1 million General Fund State

The department requests ongoing funds to maintain the state's Watch Me Grow Washington program (formerly known as the Child Profile Health Promotion System) which delivers critical health messages to parents, well-child visit and immunization information and reminders, and other important public health information. This request will sustain this one-of-a-kind public health.

Prevent Child Lead Exposure

\$409,000 General Fund State

The department requests funds to leverage a federal grant to promote, educate and test for lead in childcare facility drinking water. Infants and young children are at greatest risk of lead poisoning, which can have severe and permanent health impacts. Many of these youth spend a substantial time at these centers. Testing for and removing lead from these environments is an important step in reducing lead exposure. This proposal will also support staff to research, identify and connect facilities to financial resources available for remediation costs.

Department of Health

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Increase Sunrise Review Capacity

\$198,000 General Fund State

RCW 18.120 and RCW 48.47 require the department to make recommendations, called Sunrise Reviews, to the legislature on health profession credentialing proposals and proposals to add new insurance mandates. The demand for sunrise reviews has increased. In 2021, DOH received five sunrise review applications in recent years. DOH requests ongoing funding to fully resource the sunrise review process at the department.

Continue COVID-19 Vaccinations

\$60.7 million American Rescue Plan Act

Washington State reached its goal of 70% of the eligible population receiving at least one dose of COVID-19 vaccine in mid-July. However, vaccination coverage is not equal across the state or among demographic groups. Vaccine hesitancy and the increasing threat of variants, present significant obstacles for the state to resume normal business operations and move beyond the pandemic. The department is hopeful that additional federal funds will become available, but it has not received any confirmation to that effect. To ensure the continuation of critical COVID-19 vaccine work, DOH requests state funding to sustain these critical vaccine programs.

Improve Credentialing Performance

\$2.5 million American Rescue Plan Act

The COVID-19 pandemic required the Department of Health's, health professional credentialing section to shift to a continuity of operations model where most staff work from home. This change resulted in technology-related limitations associated with remote working leading to delays in processing applications for health care provider credentials and a 34,000 pending application backlog. These delays are compounding an existing health care workforce shortage crisis and impacting access to care for patients. The Department of Health requests funding to add project-based staff to improve credentialing performance with the goal of issuing credentials within seven calendar days of receiving a complete application.

Upgrade Drinking Water System

\$1.8 million Safe Drinking Water Account

The Office of Drinking Water (ODW) maintains an old, antiquated data system (SENTRY) that is becoming obsolete and unable to comply with federal requirements. The effort to maintain the database is cost prohibitive. Washington will soon be the only state that does not use the EPA supported data system, known as SDWIS. Therefore, the

Department of Health request authority to utilize its dedicated fund balance to migrate its data from the Sentry system SDWIS, the national standard.

Address Drinking Water Backlog

\$3.5 million Drinking Water Assistance Account

The Department of Health, Office of Drinking Water (ODW) receives federal funds from the EPA to support drinking water program operations. Due to COVID-19 impacts, the grant was not fully spent in the 2019-21 biennium, and work was not completed due to staff performing other work, restrictions on travel, and closures. In order to address the backlog, utilize the unspent federal grant, and comply with EPA requirements, the department requests a short-term expenditure authority increase from the Drinking Water Assistance Account.

Upgrade Medical Cannabis Registry

\$2.1 million Dedicated Marijuana Account

The Department of Health (department) maintains a medical marijuana authorization data system that provides recognition cards to qualifying patients and designated providers, allowing them to take advantage of legal protections offered by the law. The existing system, developed in 2015, needs upgrades and lacks an adequate reporting function and accessibility from mobile or tablet devices. In addition, state contracting regulations require a new procurement to go through a competitive bid process. The department requests funding to replace the medical marijuana authorization data system.

Cannabis Laboratory Testing

\$818,000 Dedicated Marijuana Account

HB 2052, passed in 2019, directed the transfer of cannabis testing lab accreditation from the Liquor and Cannabis Board (WSLCB) to the Washington State Department of Ecology and established a Cannabis Science Task Force to develop the standards for accrediting labs in Washington. The task force identified a gap in the expertise needed to review and approve lab methods and made the recommendation to create an Interagency Cooperative Team (ICT) to develop and review the accreditation standards. The Department of Health, in conjunction with the WSLCB and the Department of Agriculture (WSDA), jointly requests funding to establish this ICT.

Department of Health

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Capital Budget

Improve Critical Water Infrastructure

\$20,000 Drinking Water Assistance Account

The Department of Health, Office of Drinking Water (ODW) provides low interest infrastructure loans to public water systems that are aging and need upgrades. These loans are funded through federal grants, a state match, and loan repayment revenue. As loan repayments are received, more funds become available to revolve back into the state's water system infrastructure. In order to address the significant demand, the Department of Health requests additional authority to use loan repayment revenue to increase the amount of new loans awarded over the next two biennia.

Increase DWSRF Preconstruction Loans

\$400,000 Drinking Water Assistance Account

The Drinking Water State Revolving Fund (DWSRF) loan program helps communities provide safe and reliable drinking water and supports economic development by providing loan interest construction loans. Preconstruction loans (PCL) help water systems that do not currently qualify for DWSRF construction loans to do preconstruction activities necessary prior to constructing needed infrastructure. These loans support disadvantaged communities as they need to address public health risks in the provision of safe and reliable drinking water. The Department of Health requests expenditure authority to address the growing demand for PCL over the next 4 years.

Maintenance Level Funding Requests

Developmental Screening Engagement

\$520,000 General Fund State

The Department of Health requests the remaining funds for the Universal Developmental Screening (UDS) program to support the statewide roll-out of the new, centralized data system designed to improve screening rates and referral activities for children and their families within Washington state. Programmatic funding is required to ensure that the UDS data system is effectively used, and that promotion of screening is culturally appropriate, as communities of color currently experience disparate early screening and diagnosis rates that can impede timely access to care.



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Complete the HELMS Project

\$6.5 million Other Funds

The Department of Health is implementing a new licensing and enforcement system for health care providers and facilities. The Health Care Enforcement and Licensing Management System (HELMS) will transform licensing and enforcement processes, improve data security, support electronic records management, and improve access to information. The project has experienced unanticipated delays and issues that will extend the timeline by seven months and increase costs by \$6.5 million.

Partner Commissions

Long-Term Care Nursing Shortage (NCQAC)

\$900,000 Health Professions Account

Washington lacks an adequate number of qualified nursing assistants and nurses to meet the population's care needs, particularly in the LTC sector. Increasing the number of nursing assistants requires NCQAC approval of more programs, more program faculty, improve testing methods and clarify rules for the training programs. To address these needs, the NCQAC requests expenditure authority to adequately implement transformational changes related to training, testing, and the launch of an LPN apprenticeship pathway and address nursing workforce shortages.

Licensing Delays Lead to Decreased Patient Care (NCQAC)

\$900,000 Health Professions Account

The Nursing Care Quality Assurance Commission (NCQAC) regulates over 134,000 nurses. Since 2008, the nursing population grew more than 34.3%. Licensing staff levels remained constant, relying on innovations to consistently meet the standard fourteen-day licensure. Covid-19 highlighted the demand for faster licensing. ESSB 5092, Sec. 222(43) establishes the expectation of seven days or less to process nurse licenses but did not provide NCQAC with the spending authority to hire necessary staff to meet the new expectation. This decision package requests the needed spending authority to meet the legislative mandate, is retroactive to July 1, 2021 and ongoing.

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