HCAW November 2020 Board Meeting Agenda

Our Vision: We are inspired to position homecare services as a leader in healthcare in Washington State.

Our Mission: To promote the long-term growth and sustainability of in-home services in Washington State. HCAW provides leadership for consumers by unifying in-home services providers through public outreach, education, legislative advocacy and supporting practice standards.

Date: 11/18/20		**Time:** 12:00 p.m.-2:00 p.m.	**Location:** https://www.gotomeet.me/HCAW/hcaw-october-board-meeting (571) 317-3112 / 402-192-493	
TIME	**TOPIC**	**DISCUSSION**	**PLAN OF ACTION**	**RESPONSIBLE**
12:00 p.m.	Call to Order	Welcome/Updates • Approval of October 2020 Minutes	Approval	Rachel/All
12:15 p.m.	Legislative Updates	• Public Policy Report	Review/Approval	Leslie
12:35 p.m.	Financial Report	• October Financials • Budget Overview • Form 990 • Bank Signer Approval • Liability Insurance Update	Review	All All Britni Britni Britni
1:00 p.m.	Policies and Procedures	• Suggested Updates	Discussion/Approval	Britni/All
1:30	Contract	• Donna's Contract Review • Double Tree Contract Update	Approval Discussion	All Britni
1:45	Website	• Possible Update to Platform	Discussion	Britni
2:00 p.m.	Adjournment	Review of key deliverables/action items/decisions		Rachel
	Next Meeting	TBD		

Board Meeting Teleconference Minutes
Tuesday, October 27, 2020
10:00 – 12:00PM

Our Vision: We are inspired to position homecare services as a leader in healthcare in Washington State.

Our Mission: To promote the long-term growth and sustainability of in-home services in Washington State. HCAW provides leadership for consumers by unifying in-home services providers through public outreach, education, legislative advocacy and supporting practice standards.

ATTENDANCE

Board: Rachel Manchester, President; Gretchen Anderson, President-Elect, Amber Hahn-Keenan, Secretary/Treasurer, Marilou Church, Past President; Directors Shelly Davidson, Melinda Moore, Sheena Paylor, John Singletary, Alisa Van Sickle; Brent Korte, Ex-Officio
Staff: Leslie Emerick, Public Policy Director; Donna Goodwin, Clinical Director; Christine Opiela, Executive Director and Britni Lundin and Katie Bohocky, AMI.
Not in Attendance: Director, Geoff Meinken.

CALL TO ORDER

Rachel welcomed everyone and called the meeting to order at 10:02AM. She welcomed HCAW's new management company: Britni Lundin and Katie Bohocky, AMI.

It was moved and seconded to approve the July 16, 2020 minutes. Motion carried.

I. PUBLIC POLICY REPORT

Leslie reported

I. FINANCIAL REVIEW

Financial Report:

Christine reviewed the August and September financial reports:

- Working on collecting membership dues. Rachel would like a list of all members currently outstanding. AMI will focus on dues collection.
- NAHC the host states sharing agreement. Collect national sponsorships. Received in September but will be reflected in April.
- Need to secure general liability insurance as soon as possible. Conference insurance recommended in April.
- CPMS fee cut in September, but not processed in October. $43k CPMS Jan – July fee included in Accounts Payable.
- **Motion to defer approval of the August and September financial reports.**

2020 Draft Budget:

- Review of Christine's notes and potential changes.
- Discussion of reducing event & sponsor income due to the uncertainty of holding in-person events.
- Executive committee will meet in early November to review financials, clinical director expenses and the 2020 draft budget.
- Britni and Katie will look into any small business loan or PPP offered to 501©6's.
- Britni and Katie will look into the April 2021 Double Tree contract in the for cancelation or rescheduling.
- Discussion of continuing with RCTCLearning.net and the value to our membership. Board agreed to leave out the RCTCLearn.net yearly fee of $4,320.00.
- **Motion to approve the 2021 budget as drafted, 2nd, board unanimously accepted.**

Form 990:

- Compiling form 990 for the 2019-2020 calendar year. Due November 15th. Leah will submit once approved by the board. Next year's Form 990 will go out to bid for a CPA to complete.

II. MANAGEMENT REPORT

John Singletary stepping away from the board. John secured Alexandria Puhl "Lexi" to step into John's vacancy and fulfill his term. **Gretchen motioned to accept John's board vacancy and Lexi to fulfill John's term which concludes in 2022, Marilou 2nd, board unanimously accepted.**

III. PUBLIC POLICY DIRECTOR AGREEMENT 2020-

Leslie agreed to continue her contract without a pay increase, and no reduction in pay. Leslie's agreement is for 2-year term. Up for approval again in 2022. Leslie did receive an increase in 2019. **Melinda motioned to approve the Public Policy Director agreement for 2020-2022 without a fee increase, Tammy 2nd, board unanimously accepted.**

Communication in the beginning of November to notify membership of the new management.

Telehealth supervisory role request by Maxim –
PAC checks written and sent out. Leslie happy todo the reporting.

IV. CLOSED SESSION

It was moved and seconded to approve CPMS' reduced fee proposal. Motion carried.

Reviewed with new board members CPMS' reduced services options with varying monthly fees. These services will continue until the expected transition date of September 30, 2020.

It was moved and seconded to approve CPMS' services change to general admin for $2,500/month until September 30th. Motion carried.

The Board discussed next steps for the RFP process. HCAW will extend the RFP to Donna Goodwin and Leah Scott, CPA for individual services. The Executive Committee will oversee the process and communicate to the rest of the Board. Goal is to send RFP out by Friday, July 24th. The review and approval process will be quick, so Board members were reminded to keep an eye on communications.

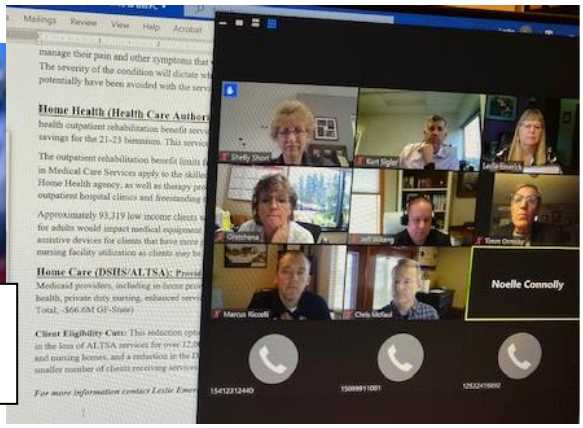
SUMMARY OF ACTION ITEMS

- Christine to finalize RFP and interview questions and send to Rachel.
- Executive Committee to notify Christine of approved CPMS fees and services.
- Rachel to send RFP to recommended firms, Donna Goodwin, and Leah Scott, CPA and track responses.
- Gretchen to schedule Executive Committee call on Tuesday, July 21 at 2:30PM. Confirm Christine is available.
- Christine to send Doodle poll for August meeting.

November 10, 2020

HCAW November 2020 Public Policy Report

Prepared by Leslie Emerick, Public Policy Director



Zoom Meeting with Spokane area legislators and In-Home Services agencies!

Legislative and Budget Overview

As we all know, elections have consequences! Not too surprisingly, Governor Jay Inslee won his third term as the Governor of Washington state against the police chief from Republic, WA. The Democrats still control both the House and Senate, but there was some movement in a few races and some are still too close to determine the winner. At latest vote count, the Senate will retain a 28-21 Democratic majority, with Senator Dean Takko -D losing to Jeff Wilson (R) in the 19th district (Longview/Coast area) and Senator Steve O'Ban-R in the 28th district (Tacoma) area making it a wash. There was a very close intraparty race between Democrats in the 5th district (east King County) and it appears that incumbent Senator Mark Mullet (D) has fought off a challenge, holding a small lead over Ingrid Anderson (D). Three Senators retired and were replaced by same party, two being former House of Representative members. There are 6 new members of the Senate.

At the latest vote count here are 16 new House members, Democrat majority with 56/42. The Democrats lost Brian Blake (D) (Longview/Coast) in the 19th district and gained Alicia Rule (D) in the 42nd. In the11th district longtime legislator Zach Hudgins lost to challenger David Hackney, both Democrats. Angie Homola (D) replaced Norma Smith (R)in the 10th district.

State revenue forecasts are to be submitted to the Governor and Legislature on or before November 20th, so we will have a better feeling for what will be included in the Governor' Budget that will come out in December. Although the last forecast came in nearly $1 billion higher than predicted, cutting the projected budget deficit for the next biennium nearly in half, we are still not fiscally out of the woods yet. The proposed cuts for home health, hospice and home care have not been made and no final decisions will happen until the final compromise budget comes out in April 2021.

HCAW, WSHPCO and WAHCA Meet with Spokane Legislators: I organized a Zoom meeting on November 6th with key legislators from the Spokane area to discuss the Proposed Agency Decision Packages In-Home Services Budget Cuts for 2021-23 Budget. The meeting was successful in gaining their awareness around the negative impacts of these types of cuts and the increased costs

that it would have on the state budget to eliminate hospice, home health rehab and reduce home care access and rates. Our speakers were:

Gretchen Anderson – Sunshine Home Health spoke to the cuts for Home Health (Health Care Authority): This budget reduction would eliminate the home health outpatient rehabilitation benefit services resulting in approximately $11,328,000 in GFS savings for the 21-23 biennium. This service is provided both in Managed Care and Fee for Service.

Chris McFaul-Horizon Hospice spoke to the Hospice Benefit (Health Care Authority): This budget reduction would eliminate hospice services resulting in approximately $24,221,000 in GFS savings for the 2123 biennium. This service is provided both in Managed Care and Fee for Service. Approximately 3,291 low income clients would be impacted by this reduction.

Jeff Wiberg -Family Resources Home Care spoke to the Home Care (DSHS/ALTSA): Provider Rate Cuts and Client Eligibility Cuts: 2.4 percent rate cuts across the board for Medicaid providers, including in-home providers, nursing homes, adult family homes, adult day health, private duty nursing, enhanced service facilities and assisted living facilities. (-$145.2M Total; -$66.6M GF-State) The client eligibility cuts would result in the loss of ALTSA services for over 12,000 people served in their own homes, community settings and nursing homes, and a reduction in DSHS and Area Agency on Aging (AAA) staff due to a smaller number of clients receiving services. (-$805.3M Total; -$385.6M GF-State; -69.6 FTE)

Kurt Sigler, Maxim Health Care Spokane Operations Manager spoke about the impacts of a 2.4% budget cut on Private Duty Nursing!

Potential Taxes under Consideration by the State Legislature: The Tax Structure Work Group, chaired by Representative Frame and Senator Wagoner are holding listening sessions to allow legislators to hear from you on a variety of tax policies to help the Tax Structure Work Group craft alternative scenarios to share with the public in 2021. The only one that mentions healthcare specifically is the Retail Sales & Use Taxes session on November 9th, but the B & O tax may be a concern as well. We are watching this closely when the session starts…

Governor Proclamations & COVID-19 Waivers

The latest COVID-19 Waivers have been extended until December 7th. We assume new ones will be posted soon thereafter hopefully until January 2021. We are hearing that the Democrats in the legislature will extend the waivers until the end of the emergency.

DSHS/ALTSA Covid Waiver Extensions:
https://www.dshs.wa.gov/sites/default/files/ALTSA/rcs/documents/multiple/020-10-08-2.pdf
DOH Waivers:
https://www.doh.wa.gov/Emergencies/COVID19/HealthcareProviders/RelaxingRegulatoryRequirements

Health Care Authority (HCA)

Adult Palliative Care Rulemaking: HCA is officially withdrawing their Adult Palliative Care Rulemaking…we knew this was coming, but sad to see its official! They felt that the agency does not have the financial resources to implement a palliative care program without additional state funding at this time. And the pandemic needs quickly overwhelmed the agencies priorities.

182-531-0955 thru -0985 Adult Palliative Care
To read the filing notice, see WSR 20-21-103 Withdrawal

Department of Health (DOH)

Request Board Action!! HCAW Board needs to determine whether to officially request rulemaking at DOH to permanently being able to do nurse supervisory visits via telehealth as well as accept telehealth for MD face to face requirement. This would require a rule change in WAC at DOH. Erica Drury, Maxim Health Care, who has requested the rules change, has prepared a white paper on the issue for your review.

telehealth nurse supervisory visits.doc

New COVID-19 Infusion Treatment: HCAW was contacted by Kathy Lofy, MD, State Health Officer to discuss the possibility of home health agencies administering a new COVID-19 infusion treatment that may soon get approval from the FDA. Here is her message for HCAW members to consider:

Two companies (Eli Lilly and Regeneron) have submitted emergency use authorization (EUA) applications to the FDA for their monoclonal antibody COVID-19 treatments. Our federal partners informed us that the FDA may be issuing an EUA for one or both monoclonal antibody treatments within the next week or two. I am writing to inform you of these potentially new COVID-19 treatments and explore your willingness to administer this medication to COVID-19 patients.

While the clinical criteria for use of these medications are currently unknown, they will likely be indicated for patients with mild or moderate laboratory-confirmed COVID-19 (i.e., outpatients) who are at high risk for severe COVID-19. Both of these therapeutic products will need to be administered via a one hour infusion early in the course of infection.

Our federal partners have asked us to begin planning around where and by whom these therapeutics can potentially be administered. We are reaching out because these medications could potentially be administered by home health agencies and would like you to consider whether your agency might be able and willing to administer this medication if ordered by a physician. **If you have any**

interest in administering these medications, please contact Rebecca Baron (rebecca.baron@doh.wa.gov) so we can add you to our list of interested entities.

Eli Lilly announced an agreement to supply the U.S. government with 300,000 vials of their monoclonal antibody treatment (bamlanivimab [LY-CoV555]) if an EUA is granted. The federal government will allocate these vials to states and directly ship them to end users or infusion pharmacies selected by the Department of Health. While the supply of these medications may initially be constrained for the first few weeks, the drug manufacturers anticipate producing enough medication to meet demand in the near future. The clinical data around these new monoclonal antibody products are still emerging. Here is a list of references.

Eli Lilly – Bamlanivimab (LY-CoV555)

- Primate study (preprint): https://www.biorxiv.org/content/10.1101/2020.09.30.318972v1
- Phase 2 trial results for LY-CoV555: https://www.nejm.org/doi/full/10.1056/NEJMoa2029849
- Phase 2 press release with results of phase 2 trial of Ly-CoV555 and LY-CoV016: https://investor.lilly.com/news-releases/news-release-details/lilly-provides-comprehensive-update-progress-sars-cov-2

Regeneron – REGN-COV2 (REGN10933 and REGN10987)

- Development: https://science.sciencemag.org/content/369/6506/1010
- Animal studies: https://science.sciencemag.org/content/early/2020/10/14/science.abe2402
- Phase 2/3 trial press release: https://investor.regeneron.com/news-releases/news-release-details/regenerons-covid-19-outpatient-trial-prospectively-demonstrates

---

COVID-19 Vaccine Provider: Attached is a letter from the secretary of health and the state health officer with information for health care providers on how to enroll to become a COVID-19 vaccine provider. Please share with your provider networks, lists, or groups who may find it relevant.

- **COVID-19 Response Planning for Providers 10-21-2020.pdf**

Washington's 'Interim COVID-19 Vaccination Plan' submitted to CDC: DOH submitted its interim vaccination plan for COVID-19 vaccine distribution to the Centers for Disease Control and Prevention (CDC) by the stated deadline of October 16, 2020.

This plan is Washington state's response to the request from the CDC for state and territorial health departments to answer questions and outline their preliminary plans for vaccine distribution. It describes how the department will approach the work of planning for and distributing an U.S. Food and Drug Administration (FDA) approved safe and effective COVID-19 vaccine once available. Read the full news release here.

Gov. Jay Inslee said Washington is joining a Western States Pact: to review the safety and efficacy of any COVID-19 vaccines once they are approved by the FDA. Other states in the partnership include California, Oregon and Nevada. The additional review will "help WA and others in western states have greater faith and greater confidence in the vaccine so that we increase the number of folks who actually get the vaccination, and of course that's imperative if we are in fact going to beat this pandemic," Inslee said at a virtual press conference Tuesday.

Hospice Certificate of Need Program: October 30, 2020: The Certificate of Need Program has posted the updated 2020-2021 hospice need forecasting method (methodology).

- The methodology reflects a recent approval in Kitsap County, and is based on the adopted hospice rules under WAC 246-310-290.
- The methodology also reflects a correction in Step 4 to include the correct populations in the projection years.
- The methodology also reflects an update to the Death Data. Though the updated data is still preliminary, new figures were made available earlier in October. The new figures show a slight adjustment to the total deaths in the state.

The hospice association has contacted Kristin Peterson, Assistant Secretary at DOH and other issue related department staff to meet and discuss concerns with the methodology. That meeting will be November 12th at 4:00 pm.

Physicians Assistants (PA) Home Health Orders Rules: According to John Hilger, The PA CR-105 (expeditated process) has been making its way through DOH leadership approvals and should be on the Secretaries desk this week. Once filed with the code reviser, there is a minimum amount of time (I think about 45 days) we have to wait to see if anyone objects to the rule change. If no objections are raised, we will prepare and file the final CR-103 and the rule will become permanent. The expedited rulemaking (CR-105) skips the public hearing and moves to adopt rule within 4-5 months. HCAW was interested in pursuing the faster "Expedited" option but need a high level of assurance that stakeholders are in support of including PAs and opposition will not be encountered.

Palliative Care Roadmap Completed and Available!! I have some good news, Pat Justis has located funds for a third printing of the PC Roadmap! One of her Program Managers has an underspent budget and would like to fund this, so we just have to spend it before 3/31/2021. Pat believes that our second printing of 5,000 will be expended by then.

HCAW, WSHPCO and many other organizations have been working with the Legislature and DOH for over 2 years to bring the Palliative Care Roadmap for patients with serious and life-threatening illnesses to fruition. We are excited that this new booklet, which was based on a similar format to the Dementia Roadmap, is now available to order for your staff and patients. And best of all, the booklet is free with no shipping charges!!

Ideally the Palliative Care Roadmap will be given to folks who are considering or eligible to receive Palliative Care or Hospice services. We believe that the publication would work best if it is given to folks "upstream" from Hospice care and may be less impactful if they are given to patients and families who are *already* receiving Palliative Care or Hospice services.

It's posted on DOH Rural Health webpage, as well as the WA Rural Palliative Care Initiative portal (https://www.doh.wa.gov/Portals/1/Documents/Pubs/609013.pdf) and offers permission for others to post it to their own web sites. For ordering: https://prtonline.myprintdesk.net/DSF/ and register.

Palliative Care-Rural Health Integration Advisory Team (PC-RHIAT): Pat Justis will provide an update on the activities of the Rural Health Program to our Palliative Care Networking Call on November 17th at 7:30 am. For more information on their efforts go to: https://waportal.org/partners/home/washington-rural-palliative-care-initiative

Nursing Care Quality Assurance Commission **(NCQAC)**

Emergency Volunteer Health Care Workers Needed: The NCQAC has been experiencing a backlog of licenses for nurses and are working to rectify it. DOH is continuing to look for medical practitioners and caregivers who are willing to support health care and long-term care facilities in the event of a surge this fall related to COVID-19. Those volunteers could be health practitioners licensed in another state who can practice in Washington if their other licenses are in good standing and they register with us. Or, they could be health practitioners licensed in Washington who want to volunteer to help meet demands in an emergency. Right now, we are urgently looking for Certified Nursing Assistants, Licensed Practical Nurses, and Health Care Assistants. Interested volunteers can visit our website at www.doh.wa.gov/emergencyvolunteer to learn more about our emergency volunteer program or email waserv@doh.wa.gov with specific questions.

Options for Working as a Nurse in Washington State: The Nursing Commission Licensing Unit created a reference document to help communicate the various options for practicing as a nurse in Washington state. It serves as a quick and easy guidance tool for nursing students, nurses, employers, facilities, and travel nursing agencies. Please utilize and share with others.

NCQAC draft Advisory Opinion for Telehealth Nursing Services: This may be of importance due to the amount of telemedicine that home health and hospice agencies have been providing, especially during the pandemic. NCQAC concludes that the appropriately prepared and competent advanced registered nurse practitioner (ARNP), registered nurse (RN), licensed practical nurse (LPN), nursing technician (NT), and nursing assistant (NA), may perform telehealth delivery of nursing care services in settings appropriate for telehealth care within their legal and individual scope of practice. This document touches on a number of areas including nurse delegation, documentation and standard of care. Please let me know if you have any comments or concerns that you would like to let staff at NCQAC know about.

NCAO XX.XX
Telehealth Nursing Se

Nurse Delegation Bill Proposed for 2021 Legislative Session: I participated in the Nurse Delegation review session with the NCQAC and was able to preserve the language in the bill related to home health and hospice agencies and expand the types of credentialed providers who can perform nurse delegation training beyond certified or registered nursing assistants. This could include home care aides as well! A new draft with the changes will be coming out soon.

LTC Workforce Development Committee: The Nursing Care Quality Assurance Commission (NCQAC) has a report to the legislature due June 30, 2021 on how to increase the number of LTC workers in the pipeline. They are acutely aware of the nursing shortage and are working on ways to create more pathways for home care aides and CNA's to become RNs. I also participate in the subcommittee on Curriculum and their latest meeting was on November 9th.

DRAFT_2020 LTC
Workforce Report_10·

Office of the Insurance Commissioner (OIC)

Palliative Care Insurance Workgroup: We requested an additional meeting with the Office of the Insurance Commissioner (OIC) on October 6th to meet with managed care organizations, commercial insurers, the Bree Collaborative, the WA State Hospital Association and other key stakeholders to discuss how to begin including a palliative care benefit as part of their covered services. This was to fulfill their obligation to convene the Palliative Care Insurer Workgroup that was created in the final Supplemental Budget bill, PSSB 6168. Although the "workgroup" was never formally formed, this was a step in the right direction to accomplish our goal of expanding access to palliative care services in our state.

We believe that the conversation was very productive and will lead to further contact with insurers. It is my understanding that legislators still plan to have a public hearing on the issue in the Aging and Long-Term Care Committee with palliative care stakeholders and the insurers. We also received the results of the survey done by the Association of Washington Healthcare Plans on how they implement and reimburse for palliative care in their plans.

Labor and Industries: **Coronavirus:** https://www.lni.wa.gov/agency/outreach/novel-coronavirus-outbreak-covid-19-resources.

Employers must notify local health department if COVID-19 spreading at the workplace: Employers **must notify** the employer's **local health jurisdiction** within 24 hours if the employer

suspects COVID-19 is spreading in the employer's workplace, or if the employer is aware of two or more employees who develop confirmed or suspected COVID-19 within a 14-day period.

Public Policy

Home Care Association of New York and New York Hospital Association Collaboration: HCAW has been in contact with the WA State Hospital Association to begin discussions about a potential collaborative in Washington state. We were all invited to watch their initial meeting on the collaborative with Al Cardillo on September 3rd. We are in discussions with the WSHA to meet and discuss how to proceed. Attached you will find the PowerPoint from the meeting:

Statewide
Hospital-Home Care (

Dementia Action Collaborative(DAC) Care Transitions Workgroup: I am a member of this new DAC Workgroup charged with identifying strategies, practices and/or programs that would help to minimize unnecessary care transitions with a focus on emergency room visits, hospitalizations and readmissions. Increasing awareness among primary care clinicians and care partners of **potentially avoidable** causes for ED visits, hospital admissions, and readmissions for people with cognitive impairment and dementia.

WA State Telemedicine Collaborative: Next meeting on November 17th. Possible new legislation to keep some of the lifted restrictions permanently such as being able to bill for audio only telemedicine visits!

Home Care Association of Washington
Balance Sheet
As of October 31, 2020

	Oct 31, 20
ASSETS	
Current Assets	
Checking/Savings	
Baird Cash and Equivalents	33,970.00
Bairds Investment Assets	92,493.21
Columbia Checking 0944	35,666.14
Columbia Money Mkt	65,683.49
Paypal	525.00
Total Checking/Savings	228,337.84
Accounts Receivable	
Accounts Receivable	13,375.00
Total Accounts Receivable	13,375.00
Other Current Assets	
Prepaid Annual Meeting Expenses	750.00
Prepaid Expenses	3,700.00
Prepaid Insurance	1,365.00
Prepaid Workshop Expenses	
Prepaid Workshop Speaker Fee	5,000.00
Prepaid Workshop Expenses - Other	720.00
Total Prepaid Workshop Expenses	5,720.00
Total Other Current Assets	11,535.00
Total Current Assets	253,247.84
TOTAL ASSETS	253,247.84
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	2,828.75
Total Accounts Payable	2,828.75
Other Current Liabilities	
Deferred Dues	
Affiliate Dues	227.53
Provider Dues	42,475.43
Total Deferred Dues	42,702.96
Other Payable	1,425.00
Total Other Current Liabilities	44,127.96
Total Current Liabilities	46,956.71
Total Liabilities	46,956.71
Equity	
Retained Earnings	-51,480.82
Unrestricted Net Assets	237,544.50
Net Income	20,227.45
Total Equity	206,291.13
TOTAL LIABILITIES & EQUITY	253,247.84

Home Care Association of Washington
Profit & Loss
July through October 2020

	Jul - Oct 20
Ordinary Income/Expense	
Income	
MEMBERSHIP	
Affiliate Dues	227.49
Provider Dues	37,461.34
Total MEMBERSHIP	37,688.83
OPERATING	
Gain/Loss on Investments	7,102.71
Interest & Dividends	563.17
Job Target/Career Board	118.16
Total OPERATING	7,784.04
PROGRAMMING	
Annual Meeting/Conv - Spring	3,208.33
Total PROGRAMMING	3,208.33
Total Income	48,681.20
Expense	
ADMINISTRATIVE	
Insurance	341.25
Management	7,500.00
Total ADMINISTRATIVE	7,841.25
ADVOCACY	
Lobbyist Expenses	375.00
Lobbyist/Legislative Consultant	14,800.00
Policy & Advocacy	375.00
Total ADVOCACY	15,550.00
MEMBERSHIP SERVICE/RETENTION	
Clinical Director	3,982.50
Total MEMBERSHIP SERVICE/RETENTION	3,982.50
PROGRAMS	
Workshops/Seminar Expense	
A/V-Technology	1,080.00
Total Workshops/Seminar Expense	1,080.00
Total PROGRAMS	1,080.00
Total Expense	28,453.75
Net Ordinary Income	20,227.45
Net Income	20,227.45

Home Care Association of Washington
Profit & Loss Budget vs. Actual
July through October 2020

	Jul - Oct 20	Budget
Ordinary Income/Expense		
Income		
MEMBERSHIP		
Affiliate Dues	227.49	2,000.00
Affiliate Sponsor	0.00	5,000.00
Provider Dues	37,461.34	175,000.00
Total MEMBERSHIP	37,688.83	182,000.00
OPERATING		
Gain/Loss on Investments	7,102.71	0.00
Interest & Dividends	563.17	750.00
Job Target/Career Board	118.16	250.00
Miscellaneous Income	0.00	100.00
Newsletter Ads/Subscriptions	0.00	100.00
Website Advertising	0.00	200.00
Total OPERATING	7,784.04	1,400.00
PROGRAMMING		
Annual Meeting/Conv - Spring		
Sponsorships/Endorsements/Rebat	0.00	5,000.00
Annual Meeting/Conv - Spring - Other	3,208.33	10,000.00
Total Annual Meeting/Conv - Spring	3,208.33	15,000.00
OCS OASIS Partnership	0.00	1,500.00
Workshops/Seminars	0.00	20,000.00
Total PROGRAMMING	3,208.33	36,500.00
Total Income	48,681.20	219,900.00
Expense		
ADMINISTRATIVE		
Bank / Merchant Fees	0.00	500.00
Business License	0.00	10.00
Contingency	0.00	500.00
Insurance	341.25	3,500.00
Management	7,500.00	72,100.00
Miscellaneous	0.00	100.00
Office Supplies	0.00	300.00
Postage	0.00	300.00
Printing/Copies	0.00	400.00
Telephone	0.00	500.00
Total ADMINISTRATIVE	7,841.25	78,210.00
ADVOCACY		
Lobbyist Expenses	375.00	1,750.00
Lobbyist/Legislative Consultant	14,800.00	44,400.00
Policy & Advocacy	375.00	1,500.00
Total ADVOCACY	15,550.00	47,650.00
COMMUNICATIONS		
Website- Reg & Maint	0.00	2,500.00
Total COMMUNICATIONS	0.00	2,500.00

Home Care Association of Washington
Profit & Loss Budget vs. Actual
July through October 2020

	Jul - Oct 20	Budget
LEADERSHIP		
Board Meetings	0.00	750.00
Strategic Planning	0.00	300.00
Total LEADERSHIP	0.00	1,050.00
MEMBERSHIP SERVICE/RETENTION		
Clinical Director	3,982.50	30,000.00
Clinical Director Expenses	0.00	500.00
NAHC Dues/Other Memberships	0.00	1,500.00
Public Relations/ Awards	0.00	250.00
Total MEMBERSHIP SERVICE/RETENTION	3,982.50	32,250.00
PROGRAMS		
Annual Mtg/Convention Spring		
A/V - Technology	0.00	4,000.00
Food and Beverage	0.00	15,000.00
Speaker	0.00	4,000.00
Syllabus	0.00	500.00
Total Annual Mtg/Convention Spring	0.00	23,500.00
Workshops/Seminar Expense		
A/V-Technology	1,080.00	250.00
Food and Beverage	0.00	2,000.00
Lodging & Transportation	0.00	1,500.00
Other Workshops/Seminar Expense	0.00	3,500.00
Speaker	0.00	10,000.00
Syllabus Copies	0.00	2,500.00
Total Workshops/Seminar Expense	1,080.00	19,750.00
Total PROGRAMS	1,080.00	43,250.00
Total Expense	28,453.75	204,910.00
Net Ordinary Income	20,227.45	14,990.00
Net Income	20,227.45	14,990.00

Home Care Association of Washington

Clinical Director

Agreement 2020-2021

The following agreement is between Donna Goodwin Consulting, LLC, an independent contractor, hereinafter referred to as the "Clinical Director" and the Home Care Association of Washington (HCAW). For the term of 2020-2021, the Clinical Director agrees to advise and advocate for HCAW by responding to member questions; assisting the Public Policy Director as needed; working with various state agencies and other associations; and interpreting regulatory requirements for members.

In consideration for performing this work, HCAW agrees to pay the Clinical Director $2500.00 per month due by the 10th of each month. Expenses falling outside this amount shall be approved in advance by HCAW and will be submitted monthly as they occur. Expenses may be included and itemized on monthly invoices.

Both parties acknowledge and expect that there will be fluctuation in the amount of time spent each month on behalf of HCAW, with more time being spent during legislative session months. If either party believe that the compensation is not appropriate for the amount of work performed, that party may bring the matter forward for discussion and resolution.

The Clinical Director reports to the HCAW Executive Director. The Clinical Director has no conflicts of interest. If a conflict or potential conflict arises during the term of the contract, consultant shall inform HCAW and an effort will be made to resolve the conflict to mutual benefit.

The terms of this agreement may be amended in writing by mutual consent. This agreement may be terminated by either party upon 30 days written notice to the other party.

Consultant acknowledges she is an independent contractor and is solely responsible for payment of related taxes. This agreement shall be governed by the laws of the State of Washington.

_____ _____

Donna R. Goodwin, Clinical Director HCAW Executive Director

Date: _____ Date: _____

10-29-2020