home care
association of washington
REPRESENTING HOME HEALTH, HOSPICE, & HOME CARE AGENCIES

HCAW
BOARD PACKET

October 27, 2020

https://www.gotomeet.me/HCAW/hcaw-october-board-meeting
Phone: (571) 317-3112
Access Code: 402-192-493

HCAW October 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: 10/27/20		**Time:** 10:00 a.m. – 12:00 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**
10:00 a.m.	Call to Order	Welcome/Updates • AMI Management Team Introductions • Approval of July 2020 Minutes	 Approval	 Rachel/All Rachel
10:25 a.m.	Legislative Updates	• Public Policy Report	Review	Leslie
10:45 a.m.	Financial Report	• August, September Financials • 2020-21 Budget • Form 990	Approval Approval	All All
11:25 a.m.	Management Report	• Board Director Change • Public Policy Director Contract Renewal • PAC Checks • Transition Notes	Discussion/Approval Review	Christine/All Christine/All Christine Christine
12:00 p.m.	Adjournment	Review of key deliverables/action items/decisions		Rachel
	Next Meeting	TBD		

Board Meeting Minutes
Thursday, July 16, 2020
Teleconference
3:30 – 5:00PM

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ATTENDANCE

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

CALL TO ORDER

Rachel welcomed everyone and called the meeting to order at 3:37PM. She welcomed HCAW's new board members: Sheena Paylor, John Singletary, and Shelly Davidson.

It was moved and seconded to approve the June 23, 2020 minutes. Motion carried.

Margaret Shepherd, long-time friend and founding HCAW member, has passed away. With approval from her son, HCAW will send an email notifying the community of her passing.

I. FINANCIAL REVIEW

Financial Report:
Christine reviewed the financial reports:

- Dues are slow to come in and HCAW has extended the 5% early renewal discount to renewing members. Members who need a little more grace are handled on a case-by-case basis.
- A/P aging is CPMS' fee before approved reduction.
- Uncleared transactions include refund checks from cancelled annual conference and OASIS workshop, and PDGM summit revenue share to NAHC.

It was moved and seconded to put June 2020 financials on file. Motion carried.

II. RFP PROCESS

Christine gave an overview of suggested edits to the draft RFP. Board discussed changes and finalized deadlines. Rachel will send the final draft to recommended firms and collect responses.

DRAFT

The Board will review received proposals and select approximately three firms to interview. Christine shared questions used during the 2018 RFP process and will send additional questions to Rachel for consideration. Board members are encouraged to join all interviews and provide feedback throughout the selection process.

III. CPMS PROPOSAL

Christine shared the reduced management services options. Each tier includes basic administrative support and assistance during the RFP and transition process.

Christine reviewed the reduced management fees for Jan-June 2020. Each monthly fee has been lowered based on the reduction of hours. Typical monthly expenses (i.e. GoToMeeting, telephone) will be wrapped into these reduced fees. HCAW is responsible for other expenses (i.e. SoftEdge renewal).

The Board will discuss these options during a closed session.

IV. CLOSED SESSION

Discussion around CPMS' reduced fee proposal for $38,601.68.

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.

DRAFT

October 9, 2020

HCAW October 2020 Public Policy Report

Prepared by Leslie Emerick, Public Policy Director

State of Reform Virtual Conference: "Capitol insiders" discuss budget and health policy options for WA 2021 legislative session.

Legislative and Budget Overview

Finally, some good news for Washington State! State revenue forecasts showed improved tax revenues with increased spending on retail and food services as restrictions on businesses began to lift. With earlier federal pandemic aid and a slowly reopening economy, tax collections for the past three months came in nearly $1 billion higher than predicted, cutting the projected budget deficit for the next biennium nearly in half according to a new revenue forecast issued Sept. 23, 2020. OFM website: https://www.ofm.wa.gov/about/news/2020/09/state-revenue-projection-2019-21-increased-22-billion.

This should take some of the pressure off for draconian cuts to health care services, such as eliminating the Medicaid hospice program and rehab therapies for home health, but we are not out of the woods yet!! The Governor's "cabinet" agencies released their Agency Decision Packages in mid-September proposing significant cuts (15%) to health care for the Governor to consider in his budget. The information was also used as justification to help get Congress on board with additional state funding needed during the pandemic…which now appears unlikely.

The Governor will put out a budget, as required by law, in December that is within current state revenues that may or may not include these proposed cuts. Sometime around late February or early March 2021, the House and Senate will submit their budget proposals after the latest revenue forecasts, which will likely include some tax increases**. These cuts have not been made and no final decisions will happen until the final compromise budget comes out in April 2021.**

I have brought up our concerns with these proposed deep cuts with key legislators, such as Representative Eileen Cody, House Health Care Committee Chair, and they have assured me that nobody, including the Governor, state agencies or legislators want to make cuts like this. I think the final budget will look much different. I do not take these proposed cuts lightly but do believe that it is unlikely they will end up in the final budget in April. I predict that it will be a balance of some cuts and some revenue increases through taxation.

Proposed Agency Decision Packages In-Home Services Budget Cuts for 2021-23 Budget

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.

The outpatient rehabilitation benefit limits for clients age 21 and older and clients age 19 through 20 in Medical Care Services apply to the skilled therapy services provided through a Medicare certified, Home Health agency, as well as therapy provided by physical, occupational, and speech therapists in outpatient hospital clinics and freestanding therapy clinics.

Approximately 93,319 low income clients would be impacted by this reduction. Removal of therapies for adults would impact medical equipment utilization on items such as wheelchairs and other assistive devices for clients that have more pain or disability. It would also impact long term care and nursing facility utilization as clients may be less able to recover at a capacity to live independently.

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.

Adverse effects on the HCA's budget for inpatient and outpatient care may also be impacted. If these clients do not have Hospice services, they may need to seek care in a more expensive setting to manage their pain and other symptoms that would be addressed by the Hospice Registered Nurse. The severity of the condition will dictate whether the client is admitted or not, but these costs could potentially have been avoided with the services available under the Hospice benefit.

Home Care (DSHS/ALTSA): Provider Rate 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)

DP-PL-4D-Provider Rate Cuts.pdf

Client Eligibility Cuts: This reduction option for temporary program eligibility changes 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)

Potential Taxes under Consideration by the State Legislature: The Tax Structure Work Group, chaired by Representative Frame and Senator Wagoner, invites you to a series of virtual listening sessions this fall. The purpose of these listening sessions is 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.

- **Selective Sales Taxes:** Targeted sales taxes on certain products, such as the cigarette tax, syrup tax, tobacco tax, spirits sales tax, spirits liter tax, vapor product tax, and marijuana excise tax. **When:** 10/13/2020, 3:00 p.m.-5:00 p.m. Register by clicking this link.

- **Estate Taxes:** The estate tax applies to transfers of property located in Washington upon the death of the owner. **When:** 10/27/2020, 12:30 p.m. – 2:30 p.m. Register by clicking this link.

- **Real Property and Personal Property Taxes:** This policy area covers real property tax on land and buildings, structures, or improvements that are affixed to the land, as well as personal property taxes on other items used in business. **When:** 10/29/2020, 12:00 p.m. – 2:00 p.m. Register by clicking this link.

- **Business & Occupation (B&O) Tax and Public Utility Tax:** The B&O tax is levied on the gross receipts of all business activities conducted within the state, except for public utilities, which are subject to a public utility tax. **When**: 10/29/2020, 3:00 – 5:00 p.m. Register by clicking this link.

- **Retail Sales & Use Taxes:** The sales tax is paid on each retail sale of most articles of tangible personal property and certain services, whereas the use tax is imposed on the use of articles of tangible personal property when the sale or acquisition has not been subject to the sales tax. **When:** 11/9/2020, 11:00 a.m. – 1:00 p.m. Register by clicking this link.

Governor Proclamations & DSHS COVID-19 Waivers

Governor Inslee has can only extend the COVID-19 related proclamations when he has agreement from the "four corners" legislators. This means the leadership of the Democrats and Republicans of the House and Senate. As you will see, the Democrats wanted to extend the proclamation until December 1, but the Republicans were only willing to extend it until after the election on November 9th. Here is the letter content from the "four corners" legislators:

2020 covid extension to nov 9.docx

Inslee announces updates to Safe Start reopening plan. Gov. Jay Inslee today announced several updates to Washington's Safe Start reopening plan. The changes seek to align guidance and adjustments to regulations of several industries. Following a spike in COVID cases in July, Inslee

announced a pause to the Safe Start reopening plan. With today's announcement, all 39 counties will remain in their current phases, but the governor's announcement allows for more activity in some of the phases. The updated guidance is effective immediately. Read the full news release here for more details.

DSHS/ALTSA Covid Waiver Extensions:
https://www.dshs.wa.gov/sites/default/files/ALTSA/rcs/documents/multiple/020-10-08-2.pdf

Long-term care worker rules proclamation: The legislature has approved an extension for the governor's proclamation suspending certification requirements in community-based settings (adult family homes, assisted living facilities, and home care agencies). The proclamation, which you can find here, is effective until the termination of the COVID-19 state of emergency or November 9, 2020, whichever occurs first. This means that a caregiver can work in a community-based setting past 200 days before obtaining a nursing assistant-certified or a certified home care aide credential.

Healthcare worker licensing proclamation: The legislature has approved an extension for the governor's proclamation removing certain barriers for licensure. The proclamation, which you can find here, is effective until the termination of the COVID-19 state of emergency or November 9, 2020, whichever occurs first. Below is a summary of what the waivers pertaining to nursing assistants do.

Barriers to continued and uninterrupted healthcare practice, including continuing education and other training requirements and license renewal deadlines: Licensed health profession rules requiring continuing education (CE), AIDS education, and training in suicide assessment, treatment, and management are waived. This includes the 8 hours of CE required to maintain the medication assistant endorsement and the requirement to demonstrate clinical skills to an instructor in a practice setting in nursing assistant training programs.

Barriers to the practice of health care provider volunteers: The requirement to verify that an NA has completed basic caregiver training and core delegation training before delegation, and the Washington state nursing care quality assurance commission community-based and in-home care setting delegation decision tree are waived.

Barriers to long-expired credential reissuance: The requirement to retake nursing assistant or nursing training and pass the competency examination prior to reissuance when a nursing assistant-certified credential has been expired for over three years is waived. The COVID-19 situation is rapidly evolving. You can monitor the following COVID-19 sources for updates:

- Governor Inslee's webpage: https://www.governor.wa.gov/issues/issues/covid-19-resources
- DOH: https://www.doh.wa.gov/Emergencies/Coronavirus)
- Washington State COVID-19 webpage: https://www.coronavirus.wa.gov
- Federal COVID-19 webpage: https://www.coronavirus.gov

- Pearson Vue testing suspension information: https://home.pearsonvue.com/Standalone-pages/Coronavirus-update/United-States.aspx

Recap of Recent COVID-19 News and Updates: Newest numbers. DOH reported a total of 90,663 confirmed cases as of 11:59 pm on October 5. There have been 2,165 COVID-19 deaths in Washington. For the most recent tally of cases by county, demographics, and more, visit the Department of Health's dashboard and the state's COVID-19 risk assessment dashboard.

Long-Term Care Report Coronavirus Report: (updated on ***08/25/2020***) https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/data-tables/Weekly-COVID-19-Long-Term-Care-Report.pdf.

Department of Health (DOH)

As per our last HCAW Public Policy call, Maxim is interested in permanently being able to do nurse supervisory visits via telehealth as well as accept telehealth for MD face to face requirement. We are researching whether this would require a rule change in WAC with John Hilger at DOH and how to best proceed. Erica has prepared a white paper on the issue for your review. More to come!

telehealth nurse supervisory visits.doc

Hospice Certificate of Need Program: has posted the 2020-2021 hospice need forecasting method (methodology). It will be available on our website shortly. Survey responses are also available here. The methodology is based on the adopted hospice rules under WAC 246-310-290. Deadlines for letters of intent and the corresponding applications are county-specific. You can find the schedule by county in Table A, included in the link above. **If you have any questions or concerns related to the methodology, please contact the program in writing by October 23, 2020.**

The methodology we use includes survey responses from active providers received under signed attestation. If your responses are not accurately conveyed here, please contact us directly. We will accept corrections to survey responses that come directly from the hospice agency until October 23, 2020. We expect to post a final version of the methodology on or before October 30, 2020. If you have questions, please contact the Certificate of Need at (360) 236-2955 or at fslcon@doh.wa.gov.

Reminder: HIV Training for Health Professionals are no longer required!
The requirement for HIV training is currently being repealed in all health professions by requirement of Engrossed Substitute House Bill (ESHB) 1551—Modernizing the control of certain communicable diseases (chapter 76, Laws of 2020).

Section 22, paragraph (11) of ESHB 1551 repeals RCW 70.24.270—Health professionals—Rules for AIDS education and training. This repeal no longer requires health professionals to obtain AIDS education and training as a condition of licensure. The intent of ESHB 1551 is to help reduce stigma toward people living with HIV/AIDS by not singling out AIDS as an exceptional disease requiring special training and education separate from other communicable health conditions.

Meeting with Kelly Cooper, DOH Policy Director and Ryan Black, Deputy Assistant: Met to discuss priorities for the 2021 legislative session. One of the issues that I have been working on with them is the new HELMS Profession Licensing and Renewal. The old system is failing and DOH has been working on upgrading the system and providing additional flexibility in accessing information on professions. Originally they were looking at a $10-12 licensure fee, but now believe there is enough funding in the O2G fund for professions that they are running a bill next session to get authority from the legislature to use this funding to replace the current system. Here is the DOH Legislative Handout for the 2021 Legislative session:

2021 DOH Budget and Legislative Reque

Uniform Health Care Facility Enforcement Act: I attended the first work session with impacted stakeholders for House Bill 2426 (2020 session) and there has not been any additional meetings. The bill directs DOH to review the statutes for all health facility, types including in-home services, they license, evaluate appropriate levels of oversight, and identify opportunities to consolidate and standardize licensing and enforcement requirement across facility.

HB 1608 Providing Information to Patients on the Death with Dignity Act: During the 2019 Session, **House Bill 1608** passed. As of June 2020, the law requires that health care entities provide the following information, at the time of hiring, contracting with, or privileging health care providers and staff, and on a yearly basis thereafter. Further definitions and requirements of the law are explained on the **Department of Health 1608 FAQ page**. In accordance with the law, the Department also has information online regarding the Death with Dignity Act **here**. A one-page handout that health care professionals can print and use for easy reference is available **here (PDF).**

Physicians Assistants Home Health Orders Rules: No new updates from John Hilger, DOH In-Home Services Program Manager on when they will initiate a permanent rule change. In order to make this permanent, we have two rule process options: Standard rulemaking (CR-101, 102, 103) that includes a public hearing and takes 9-12 months to complete or Expedited rulemaking (CR-105) that skips the public hearing and moves to adopt rule within 4-5 months. HCAW is 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!! 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. Due to the pandemic, DOH is asking us to order them directly from the WA State Department of Enterprise Services. It will work best if each organization creates an account and orders the number of copies they want and get delivery directly to the program who placed the order. 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 full permission for others to post it to their own web sites. Below please find instructions for ordering:

1. Go to: https://prtonline.myprintdesk.net/DSF/
2. **Register for an account** –
3. Log on to MyPrint
4. In the search bar at the top enter: Palliative Care Road Map
    a. Enter the quantity you want, Click BEGIN
    b. Proceed to Check Out
    c. If you have any problems completing your registration, call the Customer Service Representatives at DES Andy Schoen 360.664.4335 Linda Strait 360.664.4366

A special thanks to Pat Justis, the Rural Health Executive Director, who led the Palliative Care Roadmap efforts at DOH, and to our team of palliative care experts who worked on the drafting and creation of this wonderful document. Well done!!!

Palliative Care-Rural Health Integration Advisory Team (PC-RHIAT): The Rural Health Program had a "Congress on Palliative Care" to review the progress that the advisory team has made over the past two years. It was a very powerful 4-hour long meeting where they talked about lessons learned and where the group plans to go from here.
https://waportal.org/partners/home/washington-rural-palliative-care-initiative

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

Death with Dignity Advisory Opinion Revision: NCQAC is working on a revision to accommodate the new law passed this year related to the Death with Dignity Act, **House Bill 1608**

Debbie Carlson is hoping to take this to the commission in November. There are still some issues about physicians in the document that they will be working out with the WA Medical Commission.

NCAO 20.01 Death with Dignity-Aid-in-Dy

NCQAC draft document for telehealth nursing services: It will be presented to the full commission at the next business meeting. 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

LTC Workforce Development Committee: Here is the latest draft of the LTC Workforce Report that I have been participating on since 2018 as a Steering Committee member. This report details the work and major outcomes of the 2019-2021 Long-Term Care (LTC) Workforce Development Steering Committee and discusses the massive impact of COVID-19 on LTC, including solutions that have been implemented and others for potential consideration. Because the activities of the LTC Workforce Development Steering Committee is legislated for the biennium, their work is planned to continue through June 2021. The Nursing Care Quality Assurance Commission (NCQAC) requests acceptance by the legislature of this report as interim with a final report submitted by June 30, 2021.

DRAFT_2020 LTC Workforce Report_10·

Office of the Insurance Commissioner (OIC)

Palliative Care Insurance Workgroup: WSHPCO 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. Barb Hansen, WSHPCO Executive Director, prepared the agenda and the attached PowerPoint to include:

- Overview of ESSB 6168 Budget Proviso passed in the legislature
- 2019: Bree Collaborative Palliative Care Final Report, accepted by Health Care Authority
- HCA working on update to Palliative Care rules which have been postponed
- OIC and AWHP Palliative Care Survey Submitted
- Review Recommendations from the Bree Collaborative Report
- Discuss State and Federal efforts to increases access to Palliative Care Services
- Review WSHPCO's goals regarding Palliative Care services in the state
- Invitation for future discussions

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.

AWHP Response to OIC Palliative Care Sui

WSHPCO Presentation for the M

Health Care Authority (HCA) : **Coronavirus:** https://www.hca.wa.gov/information-about-novel-coronavirus-covid-19

HCA Rulemaking Emergency Adoption (CR103E) for Home Health Orders/ARNP-PAs: The final emergency rules have been released for allowing advanced registered nurse practitioners and physician assistants to perform the Face-to-face encounter requirements for ordering home health. WAC 182-551-2040**,** Home Health - see WSR 20-16-083. The agency is also working on permanent rules for this requirement.

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

2021 Salary Thresholds set for Overtime Exempt Employees: The Washington State Department of Labor & Industries (L&I) has calculated the new state minimum salary thresholds for overtime exempt employees. The new thresholds will go into effect Jan. 1, 2021. Using data from the U.S. Bureau of Statistics, L&I has determined the minimum wage for next year will be $13.69 an hour, up from $13.50 an hour in 2020. That new minimum wage will impact some employees exempt from overtime and other protections of the Minimum Wage Act. Employees defined as executive, administrative and professional, as well as outside salespeople and computer professionals must perform certain duties and usually must earn a salary that meets or exceeds a minimum specified threshold.

L&I changed how this minimum threshold is determined when updates to the state overtime rules took effect July 1. The salary thresholds are now a multiplier of the minimum wage. Using the 2021 minimum wage, L&I has calculated the salary thresholds taking effect Jan. 1, 2021:

- Small businesses (1-50 employees): An exempt employee must earn a salary of at least 1.5 times the minimum wage, or $821.40 a week ($42,712.80/year).
- Large businesses (51 or more employees): An exempt employee must earn a salary of at least 1.75 times the minimum wage, or $958.30 a week ($49,831.60/year).

In addition, the new minimum wage changes the 2021 thresholds for computer professionals who are paid by the hour. Because the new state thresholds will be more favorable than the federal threshold of $684/week ($35,568/year), Washington employers will have to adhere to the state thresholds in 2021. The threshold multiplier will be phased in until it reaches 2.5 times the minimum wage in 2028. At that point, increases will be determined by any changes in the minimum wage caused by inflation.

As part of its education and outreach efforts, L&I is offering webinars to help employers and employees understand the rule changes. The webinar begin with a 45-minute presentation by outreach specialists from L&I's Employment Standards program, followed by 30 minutes for questions and answers. You can register at L&I's calendar of workshops, events and webinars. See "Overtime Exemptions Training Sessions (Webinar)" in the "Event Title" pull down menu.

L&I has also developed an array of digital tools. They include an online course plus facts sheets, case examples, technical documents, and threshold implementation charts that can be found at L&I's overtime resource center web page. You can read the complete rules in WAC 296-128, sections 500-545. For additional information, you can contact L&I's Employment Standards program at EAPRules@Lni.wa.gov or toll free at 1-866-219-7321.

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 (

Inland NW State of Reform Virtual Health Policy Conference: I was invited to be part of a virtual panel discussion on 'Capitol Insiders' and their view of health policy, and what next year's legislative session is shaping up to like, and how that will change depending on the elections. They normally hold this conference in person but have adjusted the format due the impact of COVID-19. So, this year, the 2020 Inland NW State of Reform conference will be virtual and held over 2 days: Sept 23rd and Sept 24th. https://washingtonstatewire.com/capitol-insiders-discuss-budget-and-health-policy-options-teed-up-for-washingtons-2021-legislative-session/

Amazon Expands In-Home Care Program (*Home Health Care News*, September 23, 2020) About a year ago, Amazon announced the launch of a new virtual care clinic to give some of its employees access to telehealth and in-home care services. The online retail giant is now expanding that program—dubbed "Amazon Care"—as it takes another step closer toward disrupting the in-home care landscape. When Amazon initially rolled out its care offering, it was mainly for employees and their dependents living in the Seattle area. The company ... is now scaling Amazon Care throughout the entire state of Washington. ... The expansion is partly tied to the COVID-19 pandemic, which has accelerated efforts to shift care into the home across health care and technology sectors. ... Among its services, Amazon Care gives eligible employees and their dependents the ability to coordinate a visit from a mobile care nurse, who can conduct in-person health exams, testing and treatment. The program also gives eligible participants access to "care couriers" for prescription deliveries and clinicians via its in-app chat services.

I contacted John Hilger at DOH to discuss concerns about licensure for this service and here are his thoughts "This is indeed very interested. Whether or not "Amazon Care" requires a DOH In-Home Services license depends on the details. The Amazon article and linked video provides some details but not a lot. More information is needed about what they are actually providing. If they plan to provide hands on care, then I think they would likely require a license. If they are only providing RX delivery or telemedicine, this may be outside our licensure scope. We can always run this through our weekly "unlicensed" Case Management Team to see if they would authorize an investigation. Investigations are authorized based on details provided and I'm not sure we have enough yet." More to come as John researches this issue!

Dementia Action Coalition (DAC) Care Transitions Workgroup: Meeting on September 3, 20 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: Last meeting was on September 15th, with good discussions on how to keep the telemedicine ball rolling after the pandemic emergency rules start to fade away. Possible new legislation to keep some of the lifted restrictions permanently!

Home Care Association of Washington
Statement of Financial Position
As of August 31, 2020 and 2019

	Sept 30, 20	Sept 30, 19
ASSETS		
Current Assets		
Checking/Savings		
1000 · PCB Checking 0944	86,836.26	75,701.44
1010 · PCB Money Mkt	65,682.93	95,630.05
1020 · Baird Cash and Equivalents	33,970.00	31,303.03
1030 · Bairds Investment Assets	92,493.21	106,667.31
1050 · Paypal	525.00	1,242.45
Total Checking/Savings	279,507.40	310,544.28
Accounts Receivable		
1200 · Accounts Receivable	12,900.00	12,875.00
Total Accounts Receivable	12,900.00	12,875.00
Other Current Assets		
1300 · Prepaid Expenses	4,075.00	4,075.00
1310 · Prepaid Insurance	1,365.00	1,365.04
1350 · Prepaid Annual Meeting Expenses	750.00	
1375 · Prepaid Workshop Expenses		720.00
1380 · Prepaid Workshop Speaker Fee	5,000.00	0.00
1375 · Prepaid Workshop Expenses - Other	720.00	0.00
Total 1375 · Prepaid Workshop Expenses	5,720.00	720.00
Total Other Current Assets	11,910.00	6,160.04
Total Current Assets	304,317.40	329,579.32
TOTAL ASSETS	**304,317.40**	**329,579.32**
LIABILITIES & NET ASSETS		
Liabilities		
Current Liabilities		
Accounts Payable		
2000 · Accounts Payable	49,215.43	30,536.33
Total Accounts Payable	49,215.43	30,536.33
Other Current Liabilities		
2110 · Deferred Dues		
2115 · Provider Dues	49,375.60	54,019.44
2120 · Affiliate Dues	227.53	749.07
Total 2110 · Deferred Dues	49,603.13	54,768.51
2360 · Payable to HCAW PAC	0.00	1,785.00
Total Other Current Liabilities	49,603.13	56,553.51
Total Current Liabilities	98,818.56	87,089.84
Total Liabilities	98,818.56	87,089.84
Net Assets		
3000 · Unrestricted Net Assets	186,063.68	237,544.50
Net Income	19,435.16	4,944.98
Total Net Assets	205,498.84	242,489.48
TOTAL LIABILITIES & NET ASSETS	**304,317.40**	**329,579.32**

Home Care Association of Washington
Statement of Activities
For the Month Ended August 31, 2020 and 2019

	Sept 20	Sept 19	Year to Date Jul - Sept 20
Ordinary Income/Expense			
Income			
4000 · Provider Dues	13,202.15	18,006.40	24,737.37
4010 · Affiliate Dues	75.83	249.68	227.49
4200 · Workshops/Seminars	0.00	8,150.00	0.00
5000 · Interest & Dividends	3.47	15.30	6.92
Total Income	13,281.45	26,421.38	24,971.78
Expense			
7000 · Management/Facilities/Staff/Equ	2,500.00	12,083.33	7,500.00
7010 · Service Charge Expense	0.00	21.50	0.00
7020 · Staff Travel	0.00	70.53	0.00
7130 · Lobbyist/Legislative Consultant	3,700.00	3,700.00	11,100.00
7180 · Clinical Director	963.75	1,218.75	3,982.50
7195 · Policy & Advocacy	125.00	125.00	375.00
7230 · Insurance	113.75	108.33	341.25
7270 · Telephone	0.00	60.00	0.00
7290 · Tech. Dev/Maint/Website	0.00	210.61	0.00
7540 · Strategic Planning	0.00	4,258.56	0.00
7900 · Workshops/Seminar Expense			
7920 · Technology	360.00	360.00	1,080.00
Total 7900 · Workshops/Seminar Expense	360.00	360.00	1,080.00
Total Expense	7,762.50	22,216.61	24,378.75
Net Ordinary Income	5,518.95	4,204.77	593.03
Other Income/Expense			
Other Income			
9000 · Baird Change in Market Value	-2,436.67	1,434.88	7,102.71
9100 · Baird Income and Distributions	194.75	452.67	552.70
Total Other Income	-2,241.92	1,887.55	7,655.41
Net Other Income	-2,241.92	1,887.55	7,655.41
Net Income	**3,277.03**	**6,092.32**	**8,248.44**

Home Care Association of Washington
Statement of Financial Position
As of August 31, 2020 and 2019

	Aug 31, 20	Aug 31, 19
ASSETS		
Current Assets		
Checking/Savings		
1000 · PCB Checking 0944	81,089.22	71,251.23
1010 · PCB Money Mkt	65,680.96	95,615.38
1020 · Baird Cash and Equivalents	33,843.20	30,914.17
1030 · Bairds Investment Assets	94,861.93	105,168.62
1050 · Paypal	525.00	1,242.45
Total Checking/Savings	276,000.31	304,191.85
Accounts Receivable		
1200 · Accounts Receivable	12,900.00	12,875.00
Total Accounts Receivable	12,900.00	12,875.00
Other Current Assets		
1300 · Prepaid Expenses	4,200.00	500.00
1310 · Prepaid Insurance	113.75	1,473.37
1350 · Prepaid Annual Meeting Expenses	750.00	0.00
1375 · Prepaid Workshop Expenses		
1380 · Prepaid Workshop Speaker Fee	5,000.00	0.00
1375 · Prepaid Workshop Expenses - Other	1,080.00	1,080.00
Total 1375 · Prepaid Workshop Expenses	6,080.00	1,080.00
Total Other Current Assets	11,143.75	3,053.37
Total Current Assets	300,044.06	320,120.22
TOTAL ASSETS	**300,044.06**	**320,120.22**
LIABILITIES & NET ASSETS		
Liabilities		
Current Liabilities		
Accounts Payable		
2000 · Accounts Payable	45,920.43	14,150.25
Total Accounts Payable	45,920.43	14,150.25
Other Current Liabilities		
2110 · Deferred Dues		
2115 · Provider Dues	50,895.91	66,405.84
2120 · Affiliate Dues	303.36	998.75
Total 2110 · Deferred Dues	51,199.27	67,404.59
2360 · Payable to HCAW PAC	0.00	1,627.00
Total Other Current Liabilities	51,199.27	69,031.59
Total Current Liabilities	97,119.70	83,181.84
Total Liabilities	97,119.70	83,181.84
Net Assets		
3000 · Unrestricted Net Assets	186,063.68	237,544.50
Net Income	16,860.68	-606.12
Total Net Assets	202,924.36	236,938.38
TOTAL LIABILITIES & NET ASSETS	**300,044.06**	**320,120.22**

Home Care Association of Washington
Statement of Activities
For the Month Ended August 31, 2020 and 2019

	Aug 20	Aug 19	Year to Date Jul - Aug 20
Ordinary Income/Expense			
Income			
4000 · Provider Dues	12,723.98	16,601.46	23,302.86
4010 · Affiliate Dues	75.83	249.68	151.66
4240 · Job Target/Career Board	0.00	0.00	118.16
5000 · Interest & Dividends	3.47	17.41	6.92
Total Income	12,803.28	16,868.55	23,579.60
Expense			
7000 · Management/Facilities/Staff/Equ	2,500.00	12,083.33	5,000.00
7010 · Service Charge Expense	0.00	21.50	0.00
7130 · Lobbyist/Legislative Consultant	3,700.00	3,700.00	7,400.00
7150 · Lobbyist Expenses	0.00	425.67	0.00
7180 · Clinical Director	1,368.75	1,631.25	3,018.75
7195 · Policy & Advocacy	125.00	2,625.00	250.00
7230 · Insurance	113.75	108.33	227.50
7560 · Taxes	0.00	10.00	0.00
7900 · Workshops/Seminar Expense			
7920 · Technology	360.00	360.00	720.00
Total 7900 · Workshops/Seminar Expense	360.00	360.00	720.00
Total Expense	8,167.50	20,965.08	16,616.25
Net Ordinary Income	4,635.78	-4,096.53	6,963.35
Other Income/Expense			
Other Income			
9000 · Baird Change in Market Value	6,120.57	-8.24	9,539.38
9100 · Baird Income and Distributions	265.12	367.43	357.95
Total Other Income	6,385.69	359.19	9,897.33
Net Other Income	6,385.69	359.19	9,897.33
Net Income	**11,021.47**	**-3,737.34**	**16,860.68**

Executive Director Report
October 2020

Office Updates

Public Policy Director Agreement Renewal – *approval needed by November 30, 2020*
Leslie's contract is up for renewal this year and her 2020-2022 agreement is enclosed for review. The agreement does not include any changes to monthly fee or scope. The contract must be approved by November 30, 2020 *at the latest*.

Transition
Transition is a bit delayed on my end but AMI is still planning on beginning services Nov 1, 2020.

Board

Board Member Change – ***approval needed***
John Singletary has announced he is unable to continue serving on the HCAW Board. He has suggested his colleague, Lexi. He will provide more information about Lexi's background and skillsets. When John steps down, a vacancy will be declared for his director position. If approved by the Board, Lexi will serve out the rest of John's first term (2020-2022). At the end of this term, she will be added to the slate of nominees to be approved by membership.

From HCAW Bylaws:
In the event of a vacancy, the President, with Board approval, shall appoint a director who is a voting member and, as far as possible, is representative of the same geographic and/or provider classification, to serve the unexpired portion of the term.

Financial

2020-2021 Budget Review
HCAW's fiscal year runs July 1st – June 30th and the 2020-21 budget has not been approved yet. It was reviewed during the June 2020 board meeting, but the Board was unsure of staff expenses due to the management transition. As these are a large part of the budgeted expenses, the Board wanted to wait until a new firm was selected.

COVID-19 is causing a lot of uncertainty about what the future landscape will be, making the budget process even more difficult. Even with this uncertainty, the Board will need to approve a budget to help keep on track. The budget can always be altered if e.g. the annual conference is rescheduled. Enclosed is the updated budget proposal with comments and below are changes made from the June 2020 draft:

Income
HCAW's receives most income from membership dues and education events. COVID-19 has put a strain on our members' budgets and HCAW has had to cancel several events. I have not made any changes to budgeted income.

- #4100: I have kept $10,000 under annual conference income although the event is still undecided. HCAW has an opportunity to provide valuable online education on topics unique to our community. There is also an opportunity to partner with NAHC or neighboring state

associations to offer more comprehensive education. This budgeted amount will serve as a goal and can always be adjusted.

Expenses:

- #7000: I have updated the management fee to include CPMS' reduced services fee ($2,500/month July – Oct 2020) and AMI's monthly fee ($6,900/month Nov 2020 – June 2021). New total is $65,200 for this budgeted year. This will increase to $82,880 for the 2021-22 budgeted year as AMI will be contracted for the full fiscal year.
- #7180: I reduced the Clinical Director fees from $35,000 to $30,000 which will still accommodate any increase in hours. Actual costs are hard to define as this role is still being defined.
- #7230: Increased from $2,500 to $3,500 to account for a new general liability insurance policy and conference insurance. Conference insurance is strongly recommended if HCAW moves forward with an annual conference. Costs for general liability and conference insurance are TBD.
- #7240, 7250, 7260, 7270: Added these costs back in as they are not covered under AMI's contract. Costs are TBD but lower than previous years – i.e. printing is lower because most costs were associated with in-person events (i.e. printing certificates, name badges, meeting materials) which are now virtual.
- #7540: AMI will attend and facilitate a strategic planning session so costs have been reduced to cover expenses (i.e. food and beverages, supplies)
- #7700+: Annual conference expenses have not been updated as these will change if the conference can be held in-person, virtual, or a combination. Please note: HCAW is responsible for 80-100% of the expected revenue if the contract is cancelled ($27,752 – $34,690). These costs are high because the contract has been changed twice: first to accommodate the NAHC PDGM Summit and then because of COVID-19. While I don't anticipate you will have to pay e.g. speaker travel expenses for the conference (line #57) I have left these amounts in. They bring the conference expenses to $27,500 which is close to the amount HCAW will owe the hotel if the contract is cancelled.
- #7910: OASIS workshops have been rescheduled so this line item includes the June 2021 workshop. This was reduced from $15,000 to $10,000 as any expenses for the Nov 2021 workshop will be on the 2021-22 budget. The cost for OASIS Answers is $10,000 + travel expenses (line #64).
- #7920: I have removed the RCTCLearn.net contract renewal fees ($4,320) and the remaining amount is for any technology needs for other online education (i.e. upgraded GoToMeeting account). As a way to reduce expenses, I recommended pausing the RCTCLearn.net contract until the following year. Not many members take advantage of the program and many providers have their own internal education. *See "Education" section on next page for more information on this program.*
- #7925: Reminder that you may be able to sell any extra OASIS manuals to help offset printer costs. Profits from any book sales has not been included as part of the proposed budgeted income.

The budget now reflects:

Income: $219,050

Expenses: $201,750*

**Reminder this does not include RCTCLearn.net's $4,320 renewal fee. If the rest of the budgeted income and expenses are approved, you can renew this contract and still have fewer budgeted expenses than income.*

2019 Form 990
CPMS is working on the Form 990 and will present to HCAW for review and approval before filing.

PAC Donations
The Board electronically approved the PAC donation request from Leslie Emerick. The PAC had $2,979.81 available and $2,400 was donated. *See enclosed donation breakout for more information.*

Education

OASIS Workshops
The 2020 OASIS workshops have both been rescheduled to 2021 through OASIS Answers. OASIS Answers does not provide their workshop virtually so these classes will be in person, pending COVID-19 restrictions. The new dates are:

June 2-3 & 4, 2021
Providence Home Services
2811 S 102nd St Suite 220
Tukwila, WA 98168

November 1-2 & 3, 2021
Sunshine Home Health
10410 E. 9th Ave
Spokane Valley, WA 99206

RCTCLearn.net Online University Contract Renewal – *approval needed*
Through a partnership with RCTCLearn.net, HCAW provides a free online university to members. The 2020-2021 contract is up for renewal (we have received an extension) and the fee has not changed from last year: $4,320/year.

This has been a member benefit for at least 10 years with lessoning participation:

USER SUMMARY									
	2011	2012	2013	2014	2015	2016	2017	2018	2019
Number of Agencies with IDs Active	17	15	13	12	9	10	11	11	8
Number of Active IDs	328	743	870	185	115	511			
Courses Completed	632	1067	1067	412	419	1248	368	563	504
Contact Hours	1511	2839	2177	1838	1021	3473	760	1205	1183
Per Contact Hour Rate	$ 2.65	$ 1.41	$ 1.98	$ 2.35	$ 4.23	$ 1.24	$ 5.68	$ 3.59	$ 3.65
Satisfaction Rating	98%	97%	97%	97%	99%	97%	97%	97%	97%

Also see enclosed 2019 report

Some of the reduced participation is due to providers creating their own internal platforms to reduce costs and improve staff education. Members have also requested more DSHS-approved courses and are seeking other vendors.

I made a recommendation the Board consider not renewing the contract this year to help reduce budgeted expenses. If the Board agrees, this will no longer be a free member benefit. While not as

popular as it once was, the online university is being used by at least 8 providers and has been a benefit for almost a decade. The Board should also consider other online education opportunities to offer in place of the online university.

The RCTCLearn.net contract renewal fee is not included in the updated budget. If the 2020-21 budget is approved as presented, HCAW will not be providing a free online university for 2021 members.

10-19-20

HCAW Public Policy Director Agreement 2020-2022

The following agreement is between Emerick & Bloom (formerly Leslie K. Emerick LLC), an independent contractor, hereinafter referred to as "Public Policy Director," and the Home Care Association of Washington, hereinafter referred to as "HCAW." For the term December 1, 2020, through November 30, 2022, Public Policy Director agrees to advise and advocate for HCAW before the Washington State Legislature, such state agencies as appropriate, and other duties as mutually agreed upon.

In consideration of Public Policy Director performing this work, HCAW agrees to pay Public Policy Director $3,700.00 a month, due on the first of each month. This sum includes related expenses, such as mileage, phone, fax, e-mail, but does not include travel outside the King-Pierce-Snohomish-Thurston corridor. Any approved expenses incurred on behalf of HCAW will be submitted monthly and will be payable within ten (10) days of receipt.

While this contract does not establish a set number of hours to be worked on behalf of HCAW, both parties acknowledge that there are limitations under the retainer amount. In addition, both parties acknowledge and expect that there will be fluctuations in the amount of time spent each month on behalf of HCAW, with more time being spent during the legislative session months. Should 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 development of a mutually agreed-upon solution.

Consultant reports to the HCAW Executive Director. Public Policy Director warrants that she has no conflicts of interest. Should a conflict or potential conflict arise 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 that she is an independent contractor and is solely responsible for payment of any related taxes, such as B&O and social security. This agreement shall be governed by the laws of the State of Washington.

_____ _____

Leslie K. Emerick, Public Policy Director Executive Director

Date:_____ Date:_____

2020 HCAW PAC Donation Recommendations-Prepared by Leslie Emerick 9/14/20

House Health Care Committee	District	Amount	Campaign Name	Tax ID
Rep Eileen Cody (D) Chair, Health Care House Appropriations	34	$200.00	Committee to Elect Eileen Cody 6714 38th Ave SW, Seattle, WA 98126	#91-1646573
Rep Joe Schmick (R) Ranking Minority, Health Care, Appropriation	9	$200.00	People for Schmick P O Box 620 Colfax, WA 99111	#45-0582705 (W-9)
Rep Nicole Macri (D) Vice Chair, Health Care	43	$100.00	Vote Nichole PO Box 9100, Seattle, WA 98109	# 81-1159785
Rep Michelle Caldier (R) Health Care, Asst Ranking Minority	26	$100.00	Michelle Caldier for State Representative PO Box 1710 Port Orchard, WA 98366	#46-4305309
Rep Marcus Riccelli (D) Health Care	3	$100.00	Friends of Marcus Riccelli P.O. Box 1325, Spokane, WA 99210	#45-5222828
Rep Paul Harris (R) Health Care, Appropriations	17	$100.00	Elect Paul Harris 1916 SE 130th Ave Vancouver, WA 98683	#27-2531536
Frank Chopp (D) Health Care, Appropriation	43	$100.00	Friends of Frank Chopp 4209 Sunnyside Ave North, Seattle, WA 98103	#32-0020852
Rep Steve Tharinger (D) Health Care, Capital Budget Chair	24	$100.00	Tharinger for State Representative P.O. Box 834, Sequim, WA 98382	#27-2555702
Rep Jacquelin Maycumber (R) Health Care	7	$100.00	Committee to Elect Jacquelin Maycumber c/o Steve Oswin, 127 N. Wynne St., Colville WA 99114	#82-1133084
Rep My-Linh Thai (D) Health Care	41	$100.00	Friends of My-Linh Thai (D), 11900 NE 1st St. St#300, Bellevue, WA 98005	#82-4927031
Rep Kelly Chambers (R) Health Care	25	$100.00	Friends of Kelly Chambers (R) 1002 N Meridian, STE 100 PMB 207, Puyallup, WA 98371	#82-5044633
Rep Lauren Davis (D) Health Care	32	$100.00	Elect Lauren Davis (D) PO Box 9100, Seattle, WA 98109	#82-4710355
Rep Emily Wicks (D) Health Care	38	$100.00	Friends of Emily Wicks 1730 Baker Avenue, Everett, WA 98201	#85-0807481
Rep Monica Jurado Stonier (D) Health Care	49	$100.00	Vote Monica Stonier (D), PO Box 61762, Vancouver, WA 98666	#27-1504430
Total		**$1600.00**		
Senate Health Care Committee	**District**	**Amount**	**Campaign Name**	**Tax ID**
Senator Annette Cleveland (D) Chair of Senate Health Care Committee	49	$200.00	Annette Cleveland for State Senate 6400 NE Highway 99, Suite G340, Vancouver, WA 98665	#45-4514627
Senator Ann Rivers (R) Senate Health Care, Rules, Ways & Means	18	$100.00	Friends of Ann Rivers P.O. Box 957, La Center, WA 98629	#01-0735404
Senator Steve O'Ban (R) Ranking Minority Member, Senate Health Care	28	$200.00	FRIENDS OF STEVE O'BAN PO BOX 65335, UNIVERSITY PLACE, WA 98464	#27-1992105

2020 HCAW PAC Donation Recommendations-Prepared by Leslie Emerick 9/14/20

Running for Senate: June Robinson (D) Health Care	38	$100.00	Citizens for June Robinson 616 Wetmore Ave, Everett, WA, 98201	#45-5346884 (W9 upon request)
Senator Ron Muzzall (R) Senate Health Care	10	$100.00	Friends of Ron Muzzall 316 SE Pioneer Way # 116, Oak Harbor, WA, 98277	#84-3507121
Senator Kevin Van De Wege (D) Senate Health Care, Ways & Means	24	$100.00	Committee To Elect Kevin Van De Wege For State Senate (D) 10 Sable Court, Sequim, WA 98382	#20-0522366
Total		**$800.00**		
Total				

Total PAC Donations	
House Health Care Committee Members	$1600.00
Senate Health Care Committee Members	$800.00
Total PAC Donations	**$2400.00**

	Jul '19 - June 20	2018-19 Budget	2019-20 Budget	2020-21 Budget	Christine's comments
Ordinary Income/Expense					
Income					
4000 · Provider Dues	124,867.29	215,000.00	215,000.00	175,000.00	Dues run Jan-Dec so some of this income will be 2020 dues received. Membership is based on previous year's gross revenue so even if all members renew their dues rate will be lower due to COVID-19.
4010 · Affiliate Dues	1,918.09	4,000.00	4,000.00	2,000.00	
4100 · Annual Meeting/Conv - Spring	5,545.84	48,000.00	40,000.00	10,000.00	recommend still holding a 2021 conference, even if it has to be a live/virtual combo. May be future NAHC summits to partner on.
4110 · Conf Trade Show Booth	0.00	25,000.00	12,500.00	0.00	not anticipating having much income from exhibitors - most will transition to sponsors
4200 · Workshops/Seminars	8,783.10	45,000.00	48,000.00	20,000.00	includes OASIS Workshops, revenue shares, and any other seminars
4240 · Job Target/Career Board	119.25	1,500.00	1,250.00	250.00	consider offering one free job posting for members to drive more traffic to the career center
4250 · Newsletter Ads/Subscriptions	0.00	650.00	500.00	100.00	
4280 · Sponsorships/Endorsements/Rebat	0.00	2,500.00	5,000.00	5,000.00	annual conference sponsorships
4285 · Affiliate Sponsor	0.00	7,500.00	7,500.00	5,000.00	member category
4300 · Health Care Reform Income	0.00	0.00	0.00	0.00	*recommend removing COA*
4310 · OCS OASIS Partnership	0.00	1,500.00	1,500.00	1,500.00	June 2021 OASIS Workshop - received $2900 in 2020
4370 · Miscellaneous Income	0.00	0.00			
4385 · Website Advertising	0.00	1,000.00	750.00	200.00	using third part like AdButler (see marketing options: https://njcpa.org/partner)
5000 · Interest & Dividends	102.10				*don't budget for this*
Total Income	141,335.67	351,650.00	336,000.00	219,050.00	
Expense					
7000 · Management/Facilities/Staff/Equ	97,416.65	145,000.00	145,000.00	65,200.00	CPMS $2500 fee for July-Oct, AMI $6900 fee for Nov-June
7010 · Service Charge Expense	934.71	5,000.00	3,500.00	500.00	reduced # of payment processors so these should only be PayPal charges (2.9% + $0.30 every transaction)
7020 · Staff Travel	0.00	5,000.00	2,000.00	-	for in-person board meetings, which may not happen this budget cycle
7130 · Lobbyist/Legislative Consultant	44,400.00	41,900.00	44,400.00	44,400.00	
7150 · Lobbyist Expenses	1,356.01	1,500.00	1,750.00	1,750.00	
7180 · Clinical Director	15,177.75	50,000.00	25,000.00	30,000.00	Final costs TBD as role is further developed.
7190 · Clinical Director Expenses	0.00	3,000.00	1,500.00	500.00	if not wrapped into salary, keep this line item
7195 · Policy & Advocacy	4,000.00	2,500.00	2,500.00	1,500.00	SoftEdge contract renewal only - not budgeting for 2021 NAHC March on Washington
7230 · Insurance	1,348.78	2,000.00	3,000.00	3,500.00	2020-21 D&O Insurance: $1,365; will need to purchase general liability as per AMI contract and should include conference insurance(costs TBD)
7240 · Office Supplies/Equipment	0.00	500.00	750.00	300.00	*these costs separate under AMI contract*
7250 · Printing/Stationery	0.00	1,500.00	1,000.00	200.00	*these costs separate under AMI contract*
7260 · Photocopies	0.00	1,000.00	500.00	200.00	*these costs separate under AMI contract*
7270 · Telephone	0.00	2,670.00	720.00	500.00	*these costs separate under AMI contract*
7290 · Tech. dev/Maint/Website	0.00	650.00	5,000.00	2,500.00	Wild Apricot yearly fee ($1,728) + payment system servicing fee ($345.60) - the latter is for using PayPal and not their preferred payment processor; website domain renewal; $348 GoToMeeting renewal
7310 · Postage	0.00	0.00	750.00	300.00	conference promotions and normal office mailing
7360 · Product/Service Development	0.00	1,500.00	0.00	0.00	
7370 · NAHC Dues/Other Memberships	0.00	0.00	1,500.00	1,500.00	NAHC and Council of States
7390 · Legislative Bulletins	0.00	250.00	0.00	0.00	
7400 · Membership Certificates	0.00	0.00	250.00	-	
7440 · Public Relations/ Awards	0.00		0.00	0.00	

	Jul '19 - June 20	2018-19 Budget	2019-20 Budget	2020-21 Budget	Christine's comments
7450 · Committee & Task Force Support	0.00		1,500.00	-	
7455 · Committee & Task Force Speaker	0.00	0.00			
7450 · Committee & Task Force Support - Other	0.00	0.00			
Total 7450 · Committee & Task Force Support	0.00	0.00	1,500.00	-	
7520 · Board Meetings Expense	300.00	2,500.00	3,000.00	750.00	did budget to help reimburse for in-person events - reduced for this year due to COVID restrictions
7530 · President's Travel Expense	0.00	2,000.00	1,000.00	-	budgeted for over the past several years but have not received expenses
7540 · Strategic Planning	4,258.56	1,500.00	6,000.00	300.00	AMI can attend and facilitate strategic planning session as part of contract; expenses here are for F&B and supplies
7560 · Taxes	10.00	100.00	100.00	100.00	
7580 · Miscellaneous	91.68				
7600 · Unallocated Contingency	0.00	500.00	500.00	500.00	
7700 · Annual Mtg/Convention Spring					
7710 · Speaker	0.00	6,000.00	6,000.00	4,000.00	will vary if virtual or in-person
7715 · Food and Beverage	0.00	35,000.00	35,000.00	15,000.00	total anticipated F&B from hotel agreement - could be higher depending on event (traditionally ~$35K)
7720 · Technology	0.00	5,500.00	5,500.00	4,000.00	A/V - can possibly cut out costs but will still be high for in-person; if virtual, may want to consider using a platform other than GTM to support breakout sessions, etc.
7725 · Hand Outs	0.00	1,500.00	1,500.00	500.00	if in-person, will most likely be daily agenda, posters, etc.
7730 · Lodging	0.00	2,700.00	2,700.00	2,000.00	for keynotes, staff, board pres & pres-elect - reduced to $0 as
7740 · Travel	0.00	2,000.00	2,000.00	2,000.00	reducing to $0 as not expecting keynotes may not want to travel due to COVID-19
Total 7700 · Annual Mtg/Convention Spring	-	52,700.00	52,700.00	27,500.00	HCAW's 2021 hotel contract expects "totel anticipated revenue" to be $29,320 (mostly from hotel room pickup). If the contract is cancelled, HCAW will be responsible for 80-100% of estimated revenue.
7900 · Workshops/Seminar Expense					
7910 · Speaker	0.00	15,000.00	15,000.00	10,000.00	REDUCED: $5K due after June 2021 workshop, $5K due for Nov 2021 workshop ($10K total)
7915 · Food and Beverage	0.00	4,400.00	3,000.00	2,000.00	June 2021 OASIS breakfast, lunch, snacks, drinks
7920 · Technology	4,320.00	3,000.00	3,600.00	250.00	REMOVED RCTCLearn.net $4,320 yearly fee; remaining reserved for any new projects
7925 · Hand Outs	0.00	2,500.00	3,000.00	2,500.00	printing for June 2021 OASIS workbooks - these can be sold to recoup costs
7930 · Lodging	0.00	0.00	1,500.00	1,500.00	Speaker travel expenses for June 2021 OASIS Answers workshop
7900 · Workshops/Seminar Expense - Other	3,550.00	1,500.00	3,500.00	3,500.00	
Total 7900 · Workshops/Seminar Expense	7,870.00	26,400.00	29,600.00	19,750.00	
Total Expense	177,164.14	349,670.00	333,520.00	201,750.00	

RCTCLEARN.NET

e-learning for those who care

2019 Executive Report

Summary

The partnership between the Home Care Association of Washington (HCAW) and the Business & Workforce Education (BWE) division of Rochester Community and Technical College (RCTC) culminated in a great year!

Number of Agencies with IDs Active	**8**
Courses Completed	**504**
Contact Hours	**1183**
Per Contact Hour Rate	**$3.65**
Satisfaction Rating	**97%**

2019 Projects

Updated Courses Released in 2019

Introduction to Home Care for Therapists

Replaced Introduction to Home Care for Physical and Occupational Therapists

Description

This course assists the Physical, Occupational or Speech Therapist in understanding the unique aspects of their role, as well as the role of therapy assistants, within the home care environment. Participants are introduced to the unique challenges and opportunities posed to therapists including the special rules and regulations regarding practice in this setting.

Objectives

- Identify common home care components including rules, regulations, payer sources and terms
- Describe the various disciplines/roles in home care, their duties and the therapist's role in supervision
- Outline the referral, intake, admission process in establishing the plan of care
- Distinguish basic OASIS assessment and documentation guidelines and components for Medicare clients in home care
- Explain the importance of the therapy goals and plan of care in prioritizing effective treatment
- Identify base discharge criteria for home care clients

Documentation in Home Care for Therapists

Replaced Documentation in Home Care

Description

This course is designed to assist therapists and therapy assistants in understanding the unique aspects of documentation in home care. Further, it introduces the many aspects of developing

a plan of care from assessment through discharge. Specific home care rules and regulations regarding documentation and staff supervision in this setting will also be included in this course.

Objectives

- Explain common terms, rules and regulations and components in home care documentation and care planning including home bound status and the Outcome and Assessment Information Set (OASIS)
- Discuss the various disciplines/roles in home care, services they may provide and documentation to support the need of these services
- Identify, manage and document rehabilitation potential, DME needs and caregiver support in the home care setting
- Outline necessary documentation related to establishing patient-specific goals and plan of care, special circumstances altering the service plan, discharge planning and Medicare Conditions of Participation requirements
- Describe duties and documentation related to PT supervision of a PTA, OT supervision of a COTA, and supervision of the home health aide

Introduction to Home Care for Therapy Assistants

Replaced Introduction to Home Care for PTAs and COTAs

Description:

This course assists the Physical Therapy Assistant and Certified Occupational Therapy Assistant in understanding the unique aspects of their roles within the home care environment. Participants are introduced to the unique challenges and opportunities posed to therapy assistants including the special rules and regulations regarding practice in this setting.

Objectives

- Identify common home care components including rules, regulations, payer sources and terms
- Describe the various disciplines/roles in home care, their duties and the therapist's role in supervision
- Outline the referral, intake, admission process in establishing the plan of care
- Distinguish basic OASIS assessment and documentation guidelines and components for Medicare clients in home care
- Explain the importance of the therapy goals and plan of care in prioritizing effective treatment
- Identify base discharge criteria for home care clients

OASIS D1: What You Need to Know (Webinar)

- 90 minute overview of the changes from OASIS D to OASIS D1

OASIS D1-Integrating Data Collection into Patient Care Training Series

Provides home care and hospice professionals a foundational knowledge of the OASIS D1 tool and its importance in improving ongoing assessment data collection and quality of care for evidence based practice.

- Module 1-Welcome to OASIS
- Module 2-Patient History and Demographics
- Module 3-System Review
- Module 4-Integumentary Status
- Module 5 Part A-Functional Assessment: Understanding Ability
- Module 5 Part B-Functional Assessment: Understanding Ability
- Module 6-Functional Assessment: GG Items
- Module 7-Medication Assessments and Living Arrangements
- Module 8-Diagnosis and Care Planning
- Module 9-Discharge Management

New Website & Features in 2019

- **My Subscriptions Notification**
  A Red Bubble appears on the My Subscriptions Tab located at the top of the My Homepage when there is a message. Messages typically include information on current package enrollments and expiration dates. Watch for more features to My Subscriptions in 2020.

Miscellaneous Marketing:

- Presented Highest User Awards
- Updated the Student Guide and Admin Tools Guide
- Created an RCTCLEARN Video https://www.youtube.com/watch?v=ADY9Siam5Kk
- Banner ad on the NAHC Homepage
- Attended several State Association Annual Conferences
- Offered FREE CEU Course-Positively Representing Your Organization
- Facebook Page
- LinkedIn Profile
- Offered bi-monthly webinars
- Offered help desk support
- Directed new callers to state associations
- Lead RCTCLEARN.NET advisory meetings
- Sent out messages regarding updated courses and features
- Presented custom presentations and webinars
- Offered assistance with customized marketing pieces

Miscellaneous Projects/Accomplishments:

- RCTCLEARN.NET awarded 66,067 Certificates of Completion in 2019
- Overall Customer Satisfaction Rating of 97%
- Additional development/hosting of state specific courses/tests

ID Activity and Course Usage

The data tables share activity from calendar year 2011-2019.

User Growth

	2011	2012	2013	2014	2015	2016	2017	2018	2019
Number of Agencies with Active IDs	17	15	13	12	9	10	11	11	8
Courses Completed	632	1067	1067	412	419	1248	368	563	504
Contact Hours	1511	2839	2177	1838	1021	3474	760	1205	1183
Cost per Contact Hour	$2.65	$1.41	$1.98	$2.35	$4.23	$1.24	$5.68	$3.59	$3.65

Top Agencies in 2019

	Courses Completed
Evergreen Home Care Services	158
Kaiser Permanente Continuing Care Services Home Health	152
CareForce	81
A Helping Hand Homeare	71
Alliance Nurses	28
KVH Home Health & Hospice	12
Olympic Medical Home Health	1
Honor Care-Auburn	1

Student Survey and Satisfaction

The following four charts represent analysis of data from student surveys.

User Satisfaction

2011	2012	2013	2014	2015	2016	2017	2018	2019
98%	97%	97%	97%	99%	97%	97%	97%	97%

Sample comments from all students taking on-line health care courses.

What did you like about this learning experience?

- I feel I gained the information needed to provide the quality of care my clients deserve.
- It explained everything in detail and made it easy to follow the information; I could work on the lessons on my own time and I could bookmark and go back if I needed a break.
- Able to do when most convenient for my schedule
- It was easy to understand and comprehend
- Able to go back review
- Everything was so complete, a lot of information
- Convenience of learning at any time anywhere
- Easy to navigate
- Laid out well, no second guessing
- Easy to use; clear succinct information; learned basics of each topic with ease
- Having information available to read and then quizzes to ensure that the important information was learned
- Could retake the quiz and learn from mistakes
- It was very informational and kept me interested
- The course layout was excellent; I gained a lot and learned new skills
- All the materials are geared to help student complete the course successfully
- Gained self-confidence, more knowledgeable, very helpful to my job description
- It was user friendly and provided adequate information on how to utilize the program
- That I don't have to go to a physical 'place' to take the courses

How could this learning experience be improved?

- Add audio option
- Too many quizzes, final test would have been sufficient

- Let you go back and see the answers for the quiz
- Better starting instructions
- By adding other relevant courses
- Make longer and more detailed
- I think the program is okay but sometimes time consuming
- More story problems and add more pictures and some videos
- a combination of reading and listening
- Be a little less dry
- I did not like that the audio automatically started playing with each new screen
- Make the survey optional
- I would prefer shorter courses and more of them
- Printable/savable materials for future reference