

Amendments to House Bill 5001, as Introduced

Item 0 #1h

Front Page Adjustments

Revenues

Revenues

Language

Language:

Page 1, strike lines 26 through 40 and insert:

	"First Year	Second Year	Total
Unreserved Balance, June 30, 2016	\$1,278,097,637	\$0	\$1,278,097,637
Additions to Balance	\$112,929,105	\$(346,679,260)	\$(233,750,155)
Official Revenue Estimates	\$18,560,962,400	\$19,328,182,934	\$37,889,145,334
Revenue Stabilization Fund	\$294,653,279	\$272,542,500	\$ 567,195,779
Transfers	\$650,847,811	\$625,284,929	\$1,274,532,740
Total General Fund Revenues Available for Appropriation	\$20,897,490,232	\$19,879,331,103	\$40,776,821,335"

Page 1, strike lines 42 through 47 and insert:

	"First Year	Second Year	Total
Balance June 30, 2016	\$4,795,976,243	\$0	\$4,795,976,243
Official Revenue Estimates	\$27,771,433,871	\$28,116,292,152	\$55,887,726,023
Lottery Proceeds Fund	\$599,982,144	\$589,659,574	\$1,189,641,718
Internal Service Fund	\$2,077,103,387	\$1,975,159,775	\$4,052,263,162
Bond Proceeds	\$384,882,000	\$417,884,132	\$802,766,132
Total Nongeneral Fund Revenues Available for Appropriations	\$35,629,377,645	\$31,098,995,633	\$66,728,373,278
TOTAL PROJECTED REVENUES	\$56,526,867,877	\$50,978,326,736	\$107,505,194,613"

Page 2, strike lines 1 through 10.

Explanation:

(This amendment adjusts the general and nongeneral fund revenues in House Bill 5001 to reflect the combined impacts of the remaining Committee amendments to House Bill

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5001.)

Item 6 #1h

Chesapeake Bay Restoration Fund

Legislative Department	FY16-17	FY17-18	
Division of Legislative Services	\$0	\$310,000	NGF

Language:

Page 4, line 9, strike "\$6,612,233" and insert "\$6,922,233".

Page 4, line 3, after "1." strike "Not set out." and insert:

"Legislative Research and Analysis (78400)	\$6,612,073 \$7,109,913	\$6,612,233
Bill Drafting and Preparation (78401)	\$6,612,073 \$7,109,913	\$6,612,233
Fund Sources:		
General	\$6,592,039 \$6,842,039	\$6,592,199
Special	\$20,034 \$267,874	\$20,034

Authority: Title 30, Chapter 2.2, Code of Virginia.

A. Out of this appropriation shall be paid the annual salary of the Director, Division of Legislative Services, \$157,374 from July 1, 2016, to June 24, 2017 and \$157,374 from June 25, 2017, to June 30, 2018.

B. Notwithstanding the salary set out in paragraph A. of this item, the Committee on Joint Rules may establish a salary range for the Director, Division of Legislative Services.

C. The Division of Legislative Services shall continue to provide administrative support to include payroll processing, accounting, and travel expense processing at no charge to the Chesapeake Bay Commission, the Joint Commission on Health Care, the Virginia Commission on Youth, and the Virginia State Crime Commission.

D. Out of this appropriation, \$250,000 the first year from the general fund is provided to support the work of the Senate Joint Resolution 47 (2014) Joint Subcommittee to Study Mental Health Services in the Commonwealth in the 21st Century. The funding may be used to contract for expertise and assistance in its work to evaluate the community-based system of service

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delivery or other related topics as required by the work of the Joint Subcommittee. Any contractor hired shall evaluate the current system along with alternative delivery systems to provide the necessary information and assistance to the subcommittee in determining the most appropriate delivery system, or modifications to the current delivery system, that ensures access, quality, consistency, and accountability. Any remaining balance at year-end shall be carried forward to the subsequent fiscal year.

E. Included in this item is \$247,840 in the first year *and \$310,000 in the second year from dedicated special revenue to implement the recommendations of the Chesapeake Bay Restoration Fund Advisory Committee.*

Explanation:

(This amendment appropriates the fiscal year 2018 dedicated special revenue generated from sales of the "Friends of the Chesapeake Bay" license plate to the Chesapeake Bay Restoration Fund for the recommendations of the Chesapeake Bay Restoration Fund Advisory Committee, and appropriates the estimated amount for fiscal year 2018. Because the Division of Legislative Services was not set out in House Bill 5001 as introduced, this minor change requires including all language contained in this item in Chapter 836 to be included in the amendment.)

Item 61 #1h

Adjust NGF Appropriation for Revolving Trust Fund

Executive Offices	FY16-17	FY17-18
Attorney General and Department of Law	\$0	(\$500,000) NGF

Language:

Page 8, line 12, strike "\$3,540,386" and insert "\$3,040,386".

Explanation:

(This amendment eliminates the proposal included in House Bill 5001 as introduced to increase by \$500,000 from the nongeneral fund, from \$750,000 to \$1.25 million, the amount of cash from the revolving trust fund the OAG can use to support its operations. Increasing the amount of funding the OAG can use from the fund decreases the amount transferred to the General Fund at the end of the fiscal year.)

Item 139 #1h

Update K-3 Class Size Reduction

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Education	FY16-17	FY17-18	
Direct Aid to Public Education	\$0	\$442,039	GF

Language:

- Page 36, line 44, strike "\$6,728,174,733" and insert "\$6,728,616,772".
- Page 38, line 9, strike "\$55,357,226" and insert "\$55,799,265".
- Page 38, line 25, strike "\$111,375,310" and insert "\$111,817,349".
- Page 38, line 44, strike "\$42,389,648" and insert "\$41,947,609".
- Page 38, line 51, strike "\$121,269,427" and insert "\$121,711,466".
- Page 51, line 37, strike "\$55,357,226" and insert "\$55,799,265".
- Page 51, line 38, strike "\$42,389,648" and insert "\$41,947,609".
- Page 53, line 35, strike "\$121,269,427" and insert "\$121,711,466".

Explanation:

(This technical amendment provides \$442,039 the second year from the general fund to reflect an update to the K-3 Class Size Reduction Program for the inclusion of two additional classrooms.)

Item 139 #2h

Lottery Revenue Adjustment

Education	FY16-17	FY17-18	
Direct Aid to Public Education	\$0	(\$3,000,000)	GF
	\$0	\$3,000,000	NGF

Language:

- Page 38, line 9, strike "\$55,357,226" and insert "\$52,357,226".
- Page 38, line 25, strike "\$111,375,310" and insert "\$108,375,310".
- Page 38, line 44, strike "\$42,389,648" and insert "\$45,389,648".
- Page 39, line 26, strike "\$598,478,743" and insert "\$601,478,743".
- Page 47, line 23, strike "\$598,478,743" and insert "\$601,478,743".
- Page 51, line 37, strike "\$55,357,226" and insert "\$52,357,226".
- Page 51, line 38, strike "\$42,389,648" and insert "\$45,389,648".

Explanation:

(This amendment adds \$3.0 million the second year to reflect increased Lottery revenues collected to date in fiscal year 2018 that are ahead of the forecast.)

Item 139 #3h

Update Regional Alternative Education Program

Education

Direct Aid to Public Education

Language

Language:

Page 52, line 31, strike "\$8,639,782" and insert "\$8,838,911".

Explanation:

(This technical language amendment updates the language description in the second year to match the allocation amount for the Regional Alternative Education Program.)

Item 139 #4h

Update Governor School Enrollment

Education

FY16-17

FY17-18

Direct Aid to Public Education

\$0

(\$51,336) GF

Language:

Page 36, line 44, strike "\$6,728,174,733" and insert "\$6,728,123,397".

Page 38, line 5, strike "\$18,360,067" and insert "\$18,308,731".

Page 38, line 25, strike "\$111,375,310" and insert "\$111,323,974".

Explanation:

(This technical amendment captures \$51,336 the second year from the general fund to reflect a decrease in student enrollment for the Governor School initiative.)

Item 306 #1h

Reduce DSH Payments for Nonparticipating Hospital

Health and Human Resources

FY16-17

FY17-18

Department of Medical Assistance
Services

\$0
\$0

(\$136,425) GF
(\$136,425) NGF

Language:

Page 93, line 38, strike "\$9,990,616,122" and insert "\$9,990,343,272".

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Page 122, after line 27, insert:

"AAAAA. Disproportionate Share Hospital payments shall not be reallocated to other eligible hospitals based on hospital non-participation in fiscal year 2018. The department shall have the authority to implement these changes effective upon the passage of this act and prior to the completion of any regulatory action to effect such change."

Explanation:

(This amendment captures \$136,425 in savings to the general fund and a like amount of matching federal Medicaid funds in fiscal year 2018 in Medicaid Disproportionate Share Hospital (DSH) payments because an out of state hospital has chosen not to participate in the program. Language is added to clarify that these amounts will not be reallocated to other DSH-eligible hospitals in fiscal year 2018. Language provides the Department of Medical Assistance Services with the authority to make these changes upon passage of House Bill 5001.)

Item 306 #2h

Medicaid Transformation Requirements

Health and Human Resources

Department of Medical Assistance Services

Language

Language:

Page 110, strike line 57.

Page 111, strike lines 1 through 8, and insert:

"4.a. No later than 45 days upon the passage of this act, the Department of Medical Assistance Services shall have the authority to (1) amend the State Plan for Medical Assistance under Title XIX of the Social Security Act, and any waivers thereof, to implement coverage for newly eligible individuals pursuant to 42 U.S.C. § 1396d(y)(1)[2010] of the Patient Protection and Affordable Care Act and (2) begin the process of implementing a § 1115 demonstration project to transform the Medicaid program for newly eligible individuals pursuant to the provisions of 4.a.(1) and eligible individuals enrolled in the existing Medicaid program. No later than 180 days from the passage of this act, DMAS shall submit the § 1115 demonstration application to CMS for approval. If the State Plan amendment is affirmatively approved by CMS prior to the submission of the waiver, Medicaid coverage for newly eligible individuals may be implemented. If the State Plan amendment becomes effective without affirmative action by CMS, coverage may begin upon submission of the completed § 1115 demonstration application, per CMS notification, but no later than January 1, 2019. If the demonstration waiver cannot be completed by 180 days, despite a good faith effort to complete the application, the department may request an extension from the Chairmen of the House Appropriations and Senate Finance Committee. The department shall provide updates on the progress of the State Plan amendments and waiver applications to the Chairmen of the House Appropriations and Senate Finance

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Committees, or their designees, upon request, and provide for participation in discussions with CMS staff. The department shall respond to all requests for information from CMS on the State Plan amendments and waiver applications in a timely manner.

b. At least 10 days prior to the submission of the application for the waiver of Title XIX of the Social Security Act, the department shall notify the Chairmen of the House Appropriations and Senate Finance Committees of such pending application and provide a copy of the application. If the department receives an official letter from either Chairman raising an objection about the waiver during the 10-day period, the department shall make all reasonable attempts to address the objection and modify the waiver(s). If the department receives no objection, then the application may be submitted. Any waiver specifically authorized elsewhere in this item is not subject to this provision. Waiver renewals are not subject to the provisions of this paragraph.

c. The Department of Medical Assistance Services shall include provisions to make referrals to job training, education and job placement assistance for all unemployed, able-bodied adult enrollees as allowed under current federal law or regulations through the State Plan amendments, contracts, or other policy changes. DMAS shall also include provisions to foster personal responsibility and prepare newly eligible enrollees for participation in commercial health insurance plans to include use of private health plans, premium support for employer-sponsored insurance, health savings accounts, appropriate utilization of hospital emergency room services, healthy behavior incentives, and enhanced fraud prevention efforts, among others through the State Plan amendments, contracts, or other policy changes.

d. The demonstration project shall be designed to empower individuals to improve their health and well-being and gain employer sponsored coverage or other commercial health insurance coverage, while simultaneously ensuring the program's long-term fiscal sustainability. The demonstration project shall include the following elements in the design:

(i) two pathways for eligible individuals with incomes between 100 percent and 138 percent of the federal poverty level, including income disregards, to obtain health care coverage: premium assistance for the purchase of a health insurance plan, or premium assistance for the purchase of employer-sponsored health insurance coverage if cost effective. The premium assistance program shall assist participants in purchasing a comprehensive benefit package consistent with private market plans, compliant with all mandated essential health benefits, and inclusive of current Medicaid covered mental health and addiction recovery and treatment services. The premium assistance program shall include (1) the development of a deductible account for eligible individuals participating in the premium assistance programs, comprised of participant contributions and state funds to be used to fund the health insurance premiums and to ensure funds are available for the enrollee to cover the initial year of medical expenses for the deductible, with the ability to roll over the funds from the account into succeeding years if not fully used. The monthly premium amount for the enrollee shall be set on a sliding scale based on monthly income, not to exceed two percent of monthly income, nor be less than \$1 per month; (2) provisions for coverage to begin on the first day of receipt of the premium payment or enrollment due to treatment of an acute illness; (3) provisions for instituting a grace period followed by a waiting period prior to re-enrollment if the premium is not paid by the participant

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or if the participant does not maintain continuous coverage; and (4) provisions to recover premiums payments owed to the Commonwealth through debt set-off collections;

(ii) provisions to enroll newly eligible individuals with incomes between 0 and 100 percent of the federal poverty level, including income disregards, in existing Medicaid managed care plans with existing Medicaid benefits or in employer-sponsored health insurance plans, if cost effective. Such newly eligible enrollees shall be subject to existing Medicaid cost sharing provisions;

(iii) cost-sharing for eligible enrollees with incomes between 100 percent and 138 percent of the federal poverty level, including income disregards, designed to promote healthy behaviors such as the avoidance of tobacco use, and to encourage personal responsibility and accountability related to the utilization of health care services such as the appropriate use of emergency room services. However, such individuals who also meet the exemptions listed in (iv) shall not be subject to cost sharing requirements more stringent than existing Medicaid law or regulations. Enrollees who comply with provisions of the Medicaid program, including healthy behavior provisions, may receive a decrease in their monthly premiums and copayments, not to exceed 50 percent.

(iv) the establishment of the Training, Education, Employment and Opportunity Program (TEEOP) for every able-bodied, working-age adult enrolled in the Medicaid program to enable enrollees to increase their health and well-being through community engagement leading to self-sufficiency. The requirement for participation in the TEEOP program shall not apply to: (1) children under the age of 18 or individuals under the age of 19 who are participating in secondary education; (2) individuals age 55 years and older; (3) individuals who qualify for medical assistance services due to blindness or disability, including individuals who receive services pursuant to a § 1915 waiver; (4) individuals residing in institutions; (5) individuals determined to be medically frail; (6) individuals diagnosed with serious mental illness; (7) pregnant and postpartum women; (8) former foster children under the age of 26; and (9) individuals who are the primary caregiver for a dependent, including a dependent child or adult dependent with a disability.

The TEEOP shall include requirements for gradually escalating participation in training, education, employment and community engagement opportunities through the program as follows:

- a. beginning three months after enrollment, at least 20 hours per month;
- b. beginning six months after enrollment, at least 40 hours per month;
- c. beginning nine months after enrollment, at least 60 hours per month; and
- d. beginning 12 months after enrollment, at least 80 hours per month.

The TEEOP shall also include provisions for satisfaction of the requirement for participation in training, education, employment and community engagement opportunities through participation in job skills training; job search activities; education related to employment; general education, including participation in a program of preparation for the General Education Development (GED) certification examination or community college courses leading to

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industry certifications or a STEM-H related degree or credential; vocational education and training; subsidized or unsubsidized employment; community work experience; community service or public service; or caregiving services for a non-dependent relative or other person with a chronic, disabling health condition. The department may waive the requirement for participation in employment in areas of the Commonwealth with unemployment rates equal to or greater than 150 percent of the statewide average; however, requirements related to training, education and other community engagement opportunities shall not be waived in any area of the Commonwealth.

The TEEOP shall work with Virginia Workforce Centers or One-Stops to provide services to Medicaid enrollees. Such services shall include career services for program enrollees, services to link enrollees with industry certification and credentialing programs, including the New Economy Workforce Credential Grant Program, and individualized case management services.

The TEEOP shall, to the extent allowed under federal law, utilize federal and state funding available through the Temporary Assistance for Needy Families program, the Supplemental Nutrition Assistance Program, the Workforce Innovation and Opportunity Act, and other state and federal workforce development programs to support program enrollees.

Unless exempt, enrollees shall be ineligible to receive Medicaid benefits if, during any three months of the plan year, they fail to meet the TEEOP requirements and will not be permitted to re-enroll until the following plan year, unless the failure to comply or report compliance was the result of a catastrophic event or circumstances beyond the beneficiary's control.

- (v) monitoring and oversight of the use of health care services to ensure appropriate utilization;
- e. The State Plan amendment and the waiver program shall include (i) systems for determining eligibility for participation in the program, (ii) provisions for disenrollment if federal funding is reduced or terminated, and (iii) provisions for monitoring, evaluating, and assessing the effectiveness of the waiver program in improving the health and wellness of program participants and furthering the objectives of the Medicaid program.
- f. The department shall have the authority to promulgate emergency regulations to implement these changes within 280 days or less from the enactment date of this act."

Explanation:

(This amendment adds language to provide authority for the Department of Medical Assistance Services to seek approval from the Centers for Medicare and Medicaid (CMS) to enhance Medicaid coverage to certain low income individuals pursuant to the federal Patient Protection and Affordable Care Act (ACA) within 45 days of the effectiveness of this act. Language requires DMAS to seek federal approval for a State Plan amendment, while simultaneously seeking approval for a Medicaid waiver to promote efficiency, accountability, personal responsibility, and competitive, value-based purchasing of health care to provide a model of health coverage for participants that is fiscally sustainable and cost effective. Language requires the Department of Medical Assistance Services to transform the Medicaid program for newly eligible individuals pursuant to the federal Patient Protection and Affordability Act (ACA) and

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the existing Medicaid program.

Language requires that DMAS submit the § 1115 demonstration application to CMS for approval no later than 180 days from the passage of this act. If the State Plan amendments are affirmatively approved by CMS prior to the submission of the waiver, Medicaid coverage for newly eligible individuals may be implemented; however, if the State Plan amendment becomes effective without affirmative action by CMS, coverage may begin upon submission of the completed § 1115 demonstration application, but no later than January 1, 2019. If the demonstration waiver cannot be completed by 180 days, despite a good faith effort to complete the application, the department may request an extension from the Chairmen of the House Appropriations and Senate Finance Committees. Language requires DMAS to provide updates on the progress of the State Plan amendments and waiver applications to the Chairmen of the House Appropriations and Senate Finance Committees upon request and provide for participation in discussions with CMS staff. The department is required to respond to questions from the federal Centers for Medicare and Medicaid on the proposed state plan amendments and waiver application in a timely manner. Further, the agency is required to notify and submit a copy of the waiver application at least 10 days prior to federal submission to the Chairmen of the House Appropriations and Senate Finance Committees. If an objection to the waiver application is made by either Chairman, the department shall make all reasonable attempts to address the objection(s) and modify the waiver.

Language requires DMAS to include several provisions through the State Plan amendments, contracts or policy changes such as, referrals to job training, education and job placement assistance for all unemployed, able-bodied adult enrollees. In addition, DMAS is required to include provisions to foster personal responsibility and prepare enrollees for participation in commercial health insurance plans to include use of private health plans, premium support for employer-sponsored insurance, health savings accounts, appropriate utilization of hospital emergency room services, healthy behavior incentives, and enhanced fraud prevention efforts.

The demonstration waiver requires the development of a premium assistance program for individuals between 100% and 138% of the federal poverty level to obtain health insurance coverage through a private health insurance plan or through employer-sponsored coverage. It provides for a robust benefit package which includes mental health services and addiction recovery and treatment services. The premium assistance program would include the development of a deductible account for eligible individuals comprised of individual contributions and state funding, monthly individual contributions based on a sliding scale not to exceed two percent of monthly income, provisions for the date coverage begins, provisions for a grace period followed by a waiting period prior to enrollment if the premium is not paid or continuous coverage is not maintained, and provisions to recover premium payments owed through debt set-off collections. Individuals with incomes between 0 and 100% of the federal poverty level would be enrolled in Medicaid private managed care plans with existing Medicaid benefits, subject to existing Medicaid cost sharing requirements.

The waiver also requires cost sharing to encourage personal responsibility for individuals with incomes between 100% and 138% of the federal poverty level. However, individuals meeting

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one of nine exemptions to the Medicaid Training, Education, Employment, and Opportunity Program (TEEOP) would not be subject to cost sharing requirements more stringent than existing Medicaid law or regulations. Enrollees who comply with provisions of the Medicaid program, including healthy behaviors may receive a decrease in their monthly premiums and copayments, not to exceed 50 percent.

Language requires the waiver to include requirements that engage individuals enrolled in Medicaid in the TEEOP to enable them to increase their health and well-being through community engagement leading to self-sufficiency. Individuals meeting certain exemptions would not be subject to the TEEOP requirements; however, individuals who do not meet the TEEOP requirements three months out of the plan year would be disenrolled from the program and will not be permitted to re-enroll until the following plan year, unless the failure to comply or report compliance was the result of a catastrophic event or circumstances beyond the beneficiary's control. Language is also added to require both the State Plan amendments and waiver application to include systems for determining eligibility for participation in the program, provisions for disenrollment if federal funding is reduced or terminated and an evaluation component for the project. Finally, language is added to authorize the agency to implement the provisions of the language prior to the completion of the regulatory process.)

Item 306 #3h

Capture GF Savings from Repayment to the Virginia Health Care Fund

Health and Human Resources	FY16-17	FY17-18	
Department of Medical Assistance Services	\$0	(\$166,375)	GF
	\$0	\$166,375	NGF

Language:

Explanation:

(This amendment reduces the general fund by \$166,375 the second year and increases the Virginia Health Care Fund by a like amount from a repayment to the Department of Medical Assistance Services from a provider who received a prior year Disproportionate Share Hospital payment. Funds in the VHCF are used to offset the general fund cost of the Medicaid program.)

Item 310 #1h

Contract for Medicaid Waiver Application

Health and Human Resources	FY16-17	FY17-18
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Department of Medical Assistance	\$0	\$3,500,000	GF
Services	\$0	\$3,500,000	NGF

Language:

Page 123, line 12, strike "\$232,756,469" and insert "\$239,756,469".

Page 128, after line 44, insert:

"W. Out of this appropriation, \$3,500,000 from the general fund and \$3,500,000 from nongeneral funds the second year is provided for the Department of Medical Assistance Services to procure services on a sole source basis to assist in the design of an § 1115 demonstration waiver application to transform the Medicaid program for newly eligible individuals pursuant to 42 U.S.C. § 1396d(y)(1)[2010] of the Patient Protection and Affordable Care Act. The department shall ensure the vendor has had experience in designing or assisting in the design of similar demonstration waiver applications that have been approved by the Centers for Medicare and Medicaid. The department shall report on the vendor selected to the Chairmen of the House Appropriations and Senate Finance Committees within 15 days of making the selection. Unexpended funds for this procurement shall be carried forward into fiscal year 2019 for such purpose."

Explanation:

(This amendment provides \$3.5 million from the general fund and an equal amount of federal Medicaid matching funds to the Department of Medical Assistance Services to contract for assistance in designing an § 1115 demonstration waiver application to transform the Medicaid program for newly eligible individuals pursuant to the Patient Protection and Affordable Care Act (ACA). Language requires the agency to ensure the vendor has prior experience in designing a similar demonstration waiver and allows for the agency to carryover the funds into fiscal year 2019 for the contract.)

Item 345 #1h

Capture Balances in Auxiliary Grant Program

Health and Human Resources

Department of Social Services

Language

Language:

Page 148, after line 11, insert:

"N. The Director, Department of Planning and Budget, shall unallot in the second year \$250,000 from this item which reflects unused balances in the Auxiliary Grant program."

Explanation:

(This amendment adds language to capture \$250,000 in balances the second year in the

Auxiliary Grant program within the Department of Social Services.)

Item 346 #1h

Capture Balances in Adoption Subsidy Payments

Health and Human Resources

Department of Social Services

Language

Language:

Page 148, after line 11, insert:

"N. The Director, Department of Planning and Budget, shall unallot in the second year \$490,000 from this item which reflects unused balances in adoption subsidy payments."

Explanation:

(This amendment adds language to capture \$490,000 in balances in the second year in adoption subsidy payments by the Department of Social Services.)

Item 375 #1h

Remove Proposed Increase

Natural Resources

Department of Game and Inland Fisheries

Language

Language:

Page 152, line 16, delete "\$18,650,000" and insert "\$17,050,000".

Explanation:

(This amendment removes a proposed increase of \$1,600,000 in the current year from general fund revenues that are transferred to the Department of Game and Inland Fisheries and corrects an error in an embedded number included in Chapter 836. A companion amendment to Item 3-1.01 reduces the proposed increase in the transfer by a like amount. The fiscal year will be almost complete by the time the "caboose bill" is adopted and funding levels revert to \$16,850,000 in each year of the upcoming biennium.)

Item 442 #1h

Phase-In DMV REAL ID Costs

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Transportation	FY16-17	FY17-18
Department of Motor Vehicles	-10.00	-10.00 FTE

Language:

Page 166, line 34, after "of funds.", insert:

"At least 10 days prior to any draw downs from this line of credit, the Secretaries of Finance and Transportation shall report to the Chairmen of the House Appropriations and Senate Finance Committees the amount of the proposed draw down and its intended usage."

Explanation:

(This amendment phases-in DMV's FTE position enhancements required for the implementation of the federal REAL ID Act and requires reporting to the General Assembly regarding the proposed usage of the funds. Authorization in House Bill 5001 still includes an additional 15.00 FTE positions in the current fiscal year. Additional authority is included in House Bill 5002 for actions taken after June 30, 2018.)

Item 456 #1h

Technical Correction

Transportation

Department of Transportation	Language
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Language:

Page 172, strike lines 21 and 22.

Page 172, line 25, strike "331,400,000" and insert "332,900,000".

Explanation:

(This amendment makes a technical correction to remove an inadvertant appropriation of \$1.5 million to VDOT's service area 60705, Financial Assistance for Local Transportation Project Management and instead appropriately placing the funds in program 60706, Distribution of Northern Virginia Transportation Authority Fund Revenues.)

Item 476 #1h

Clarify Appointment Authority

Central Appropriations

Central Appropriations

Language

Language:

Page 195, after line 45, insert:

"R. Any nonlegislative citizen member appointed by either the Speaker of the House, the Senate Committee on Rules or the Joint Rules Committee to any Authority, Board, Commission, Committee, or other deliberative body in the Commonwealth shall serve at the pleasure of such appointing authority. Any such member may be relieved of his appointment at any time, with or without cause."

Explanation:

(This amendment is self-explanatory.)

Item 476 #2h

Provide Funding for Tax to Hire Audit Staff in FY 2018

Central Appropriations	FY16-17	FY17-18
Central Appropriations	\$0	\$176,688 GF

Language:

Page 190, line 36, strike "\$15,648,265" and insert "\$15,824,953".

Page 195, after line 45, insert:

"R. Out of the general fund amounts included in this item, \$176,688 the second year shall be transferred to the Department of Taxation to enable the Department to hire 12 additional audit staff during fiscal year 2018. The Department shall be authorized to administratively increase their maximum employment level as needed for this initiative."

Explanation:

(This amendment provides \$176,688 from the general fund in fiscal year 2018 to allow the Department of Taxation to hire 12 additional audit staff beginning in fiscal year 2018. The introduced budget assumed additional revenues from hiring 8 new audit staff beginning in fiscal year 2019. An amendment in House Bill 5002 authorizes an additional 4 staff and assumes additional revenues from the 4 additional staff. This amendments authorizes the hiring of the 12 new staff during fiscal year 2018 to maximize the revenue collections in fiscal year 2019.)

Revert DLS and Other Legislative Balances

Central Appropriations

Central Appropriations

Language

Language:

Page 195, after line 45, insert:

"R. On or before June 30, 2018, the Committee on Joint Rules shall authorize the reversion to the general fund of \$526,952, representing savings generated by legislative agencies in the second year. The total savings amount includes estimated savings within the following legislative agencies:

Legislative Agency	Estimated Savings
Division of Legislative Services (107)	\$100,000
Joint Commission on Technology and Science (845)	\$101,192
Virginia Disability Commission (837)	\$18,701
State Water Commission (971)	\$11,859
Virginia Coal & Energy Commission (118)	\$21,618
Virginia Housing Commission (840)	\$14,459
Commission on Unemployment Compensation	\$16,066
Small Business Commission (862)	\$34,746
Joint Commission on Administrative Rules (865)	\$31,558
Autism Advisory Council (871)	\$5,409
Virginia Conflicts of Interest and Ethics Advisory Council (876)	\$85,000
Joint Commission on Transportation Accountability (875)	\$26,697
Comm, on Economic Opportunity for Virginians in Aspiring & Diverse Communities (877)	\$9,647
Joint Commission on Health Care (844)	\$35,000
The Virginia Commission on Youth (839)	\$15,000

Explanation:

(This amendment provides for the transfer to the general fund of estimated unexpended balances from legislative agencies totaling \$526,952 on or before June 30, 2018.)

Item 476 #4h

Revert Year End Balance From State Corporation Commission

Central Appropriations

Central Appropriations

Language

Language:

Page 195, after line 45, insert:

"R. On or before June 30, 2018, the Director of the Department of Planning and Budget shall authorize the reversion to the general fund of \$146,890 in unexpended general fund year end balances from the State Corporation Commission."

Explanation:

(This amendment provides for the transfer to the general fund of estimated unexpended balances from the SCC totaling \$146,890 on or before June 30, 2018.)

Item 476 #5h

Revert Year End Balance from JLARC

Central Appropriations

Central Appropriations

Language

Language:

Page 195, after line 45, insert:

"R. On or before June 30, 2018, the Committee on Joint Rules shall authorize the reversion to the general fund of \$675,000 in unexpended year end balances from the Joint Legislative Audit and Review Commission."

Explanation:

(This amendment provides for the transfer to the general fund of estimated unexpended balances from JLARC totaling \$675,000 on or before June 30, 2018.)

Item C-14.50 #1h

ODU Stadium Supplement

Education: Higher Education	FY16-17	FY17-18	
Old Dominion University	\$0	\$10,000,000	NGF

Language:

Page 208, line 26, strike "\$55,000,000" and insert "\$65,000,000".

Explanation:

(This amendment provides additional nongeneral fund and 9(d) revenue bond authority for the football stadium project due to increased construction costs. Revenue for this supplement will be generated by increased fund raising and not borne by students through new or increased fees.)

Item C-19 #1h

VCU - Supplement Engineering Research Expansion

Education: Higher Education	FY16-17	FY17-18	
Virginia Commonwealth University	\$0	\$1,118,000	NGF

Language:

Page 209, line 3, strike "\$0" and insert "\$1,118,000".

Explanation:

(This amendment requests additional nongeneral fund revenue bond authority for the School of Engineering Research Expansion.)

Item C-24.15 #1h

Jamestown Settlement Pier

Education: Higher Education	FY16-17	FY17-18	
Jamestown-Yorktown Foundation	\$0	\$3,140,000	NGF

Language:

Page 209, after line 16, insert:

"§ 2-2.10 JAMESTOWN-YORKTOWN FOUNDATION (425)

Amendments to House Bill 5001, as Introduced

C-24.15 Improvements: Jamestown Settlement Pier	\$0	\$3,140,000
Fund Sources: Bond Proceeds	\$0	\$3,140,000 "

Explanation:

(This amendment provides funding for improvements to the Jamestown Settlement Pier.)

Item C-52.45 #1h

ABC Warehouse

Central Appropriations

Central Capital Outlay

Language

Language:

Page 212, after line 23, insert:

"I. The Virginia Alcoholic Beverage Control Authority and the Department of General Services (DGS) are authorized to execute an agreement for a capital project to acquire a new ABC warehouse and administrative offices pursuant to the competitive public solicitation process called for in Item C-52.45 of Chapter 836 of the 2017 Acts of Assembly. Terms of such agreement shall be cost effective and efficient to meet ABC's operational and business needs."

Explanation:

(This amendment provides the Department of Alcoholic Beverage Control (ABC) and the Department of General Services (DGS) with the authority to proceed with the new warehouse and administrative office project.)

Item 3-1.01 #1h

Transfer VASAP to Support Treatment Efforts

Transfers

Interfund Transfers

Language

Language:

Page 214, line 41, strike "\$0" and insert "\$500,000".

Explanation:

(This amendment transfers \$500,000 in fiscal year 2018 from estimated special fund balances of the Commission on the Virginia Alcohol Safety Action Program to the general fund.)

Item 3-1.01 #2h

Lottery Revenue Transfer

Transfers

Interfund Transfers

Language

Language:

Page 217, line 12, strike "\$598,478,743" and insert "\$601,478,743".

Explanation:

(This language amendment updates the lottery revenue transfer to public education to reflect an increase of \$3.0 million in the second year.)

Item 3-1.01 #3h

Remove Proposed Increase in Transfer

Transfers

Interfund Transfers

Language

Language:

Page 218, line 1, unstrike "\$4,700,000".

Page 218, line 2, strike "\$6,300,000".

Explanation:

(This amendment eliminates a proposed increase in the transfer from the general fund to the Department of Game and Inland Fisheries in the current fiscal year, which will be almost complete by the time the bill is enacted.)

Item 3-5.20 #1h

Clarify Provider Assessment Requirements for Continued Medicaid Transformation

Adjustments and Modifications to Tax Collections

Provider Assessment

Language

Amendments to House Bill 5001, as Introduced

Language:

Page 234, line 13, after, "critical access hospitals.", insert:

"The assessment shall be used to cover the full costs of the non-federal share of enhanced Medicaid coverage for newly eligible individuals pursuant to 42 U.S.C. § 1396d(y)(1)[2010] of the federal Patient Protection and Affordable Care Act."

Page 234, line 28, insert:

C. DMAS shall be responsible for collecting the assessment. Hospitals subject to the assessment shall make quarterly payments to the department equal to 25 percent of the annual "assessment" amount. In the first year of the assessment payment, quarterly amounts for the remainder of the state fiscal year shall equal one-third of the assessment. The payments are due not later than the first day of each quarter. In the first year, the first assessment payment shall be due by October 1, 2018. Hospitals that fail to make the assessment payments within 30 days of the due date shall incur a five percent penalty. Any unpaid assessment or penalty will be considered a debt to the Commonwealth and DMAS is authorized to recover it as such.

D. DMAS shall submit a report due September 1 of each year to the Director, Department of Planning and Budget and Chairmen of the House Appropriations and Senate Finance Committees. The report shall include, for the most recently completed fiscal year, the revenue collected from the assessment, expenditures for purposes authorized by this item, and the year-end assessment balance in the Virginia Health Care Fund.

E. All revenue from the assessment including penalties shall be deposited into the Virginia Health Care Fund. DMAS shall account for any revenue associated with the provider assessment separately within the Fund. Proceeds from the assessment, including penalties, shall not be used for any other purpose than to cover the full cost of enhanced Medicaid coverage for newly eligible individuals, pursuant to 42 U.S.S. § 1396d(y)(1)[2010] of the federal Patient Protection and Affordable Care Act.

F. Any provision of this item is contingent upon approval by the Centers for Medicare and Medicaid Services if necessary."

Explanation:

(This amendment adds paragraphs C, D and E related to the Medicaid provider assessment language included in House Bill 5001, as introduced, to mirror language contained in House Bill 5002, as introduced. In addition, it modifies language in the introduced budget to clarify that the provider assessment is intended to pay for the full cost of the non-federal share of enhanced Medicaid coverage for newly eligible individuals pursuant to the federal Affordable Care Act. Language further clarifies that the proceeds from the assessment, including penalties cannot be used for any other purpose.)

Item 4-14 #1h

Revenue Reserve Fund

Effective Date

Language

Language:

Page 292, line 9, strike "or June".

Page 292, line 10, strike "30, 2018,".

Page 292, line 11, after "D." insert "1.".

Page 292, line 11, after "remaining fifty percent" insert:

"from the fiscal year 2017 surplus revenues".

Page 292, after line 13, insert:

"2. The Comptroller shall reflect 100 percent of the amounts remaining from the fiscal year 2018 surplus revenues as a commitment on the preliminary balance sheet entitled Revenue Reserve to be held solely for the purposes of mitigating any loss of general fund revenues or transfers in future biennia pursuant to the provisions of House Bill 763, 2018 Session of the General Assembly, and any future appropriation acts."

Explanation:

(This amendment increases the percentage of excess fiscal year 2018 general fund revenues to be committed to the Revenue Reserve Fund established pursuant to House Bill 763, 2018 Session of the General Assembly, from 50 percent to 100 percent of the amounts remaining after other required commitments and assignments.)
