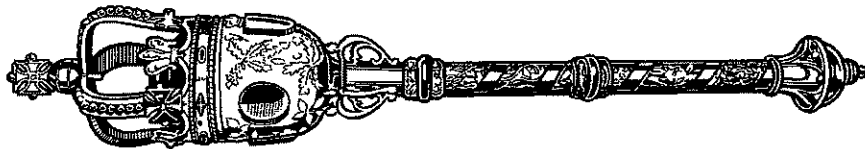


*Report of the  
House Appropriations  
Subcommittee*

*on*

*Health & Human Resources*



*House Bill 29  
&  
House Bill 30*

February 20, 2022



**REPORT OF THE SUBCOMMITTEE**  
**on**  
**HEALTH & HUMAN RESOURCES**

Mr. Chairman and Members of the Committee:

When you asked me to take on the job of becoming the Chairman of the Health and Human Resources Subcommittee, I knew I had a long row to hoe. It is a complicated area of government and the needs are always more than the available resources. Even though I am still green in this position, I am proud to say that I tried to take the bull by the horns. Today, I am presenting you with report that goes a long way to improving health care and disability services across the Commonwealth. All told, I am proud to tell you that the Subcommittee is recommending the appropriation of almost \$1.5 billion in additional general fund spending for health and human services. On a net basis, this represents almost an 11 percent increase over the current biennium.

The Subcommittee is recommending a record amount of new funding totaling \$764.5 million over the biennium to rebase rates for Developmental Disability services. This will ensure continued access to these needed services. This represents an increase of almost \$167.0 million over the introduced budget to rebase rates for additional critical DD services such as group homes regardless of size, group supported employment and group day support. The Subcommittee is also recommending 1,200 additional DD waiver slots over the biennium bringing the total number of waiver slots to 18,139 for individuals with developmental disabilities.

As you know Mr. Chairman, the members of this body have always supported funding for Developmental Disability waiver services. Historically, the House has led the effort to increase waiver slots. We supported redesigning the waivers to better serve families. We

supported rebasing the waiver rates to maintain quality providers and ensure access to services. However, early this Session, the Subcommittee was stunned to learn that the 890 new slots that we added in the budget for FY 2022 have gone unused for almost 7 months. Families waiting for services (some for years) have not yet been served. This happened because the Department of Behavioral Health and Developmental Services decided that their regulations required them to go back and re-evaluate the entire waiting list including those on the Priority 1, Priority 2 and Priority 3 waiting lists. Mr. Chairman, this is a clear case of the tail wagging the dog!

As a result, the Subcommittee felt the need to spell out directions for the agency to follow in allocating the new waiver slots for FY 2023. They will have to allocate the new slots by June and the Community Services Boards will need to assign individuals to the slots before the end of this fiscal year, so individuals with developmental disabilities can access services beginning in July. The Subcommittee looks forward to getting a better understanding of this process and ensuring that these very vulnerable citizens are getting services as soon as possible.

The Subcommittee is also recommending more than \$101.0 million over the biennium to increase funding for nursing homes. But, just to be clear, this is not a giveaway. We are proposing to continue the policy adopted last Session of basing payments on value. They will have to earn a portion of their payments by improving performance in the areas of nursing hours, hospital admissions, outpatient Emergency Department visits, and reducing pressure ulcers and urinary tract infections in patients. And, the portion of payments tied to performance will increase in FY 2024.

Finally, we are recommending more than \$268.0 million to enhance provider rates in the Medicaid program to improve access to care. Many of these rates have not been increased in well over a decade. We all realize that when provider rates are too low, low-income and disabled children and adults will not receive critically needed health care services.

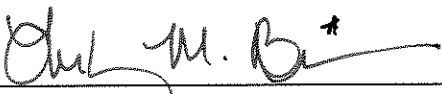
Most notably, the Subcommittee is recommending the extension of a 12.5 percent increase for community mental health providers in FY 2023 to address the increasing demand for these services over the past two years.

Mr. Chairman, I want to take a moment to thank the members of the Subcommittee for their commitment to working on health and human services issues. The issues we face require difficult choices, which affect the lives of Virginia's most vulnerable citizens. Mr. Chairman, I also want to thank you and the members of this Committee for your support of our efforts. I will now ask staff to take you through our detailed recommendations, and then I hope it will be your pleasure to adopt our Subcommittee report.



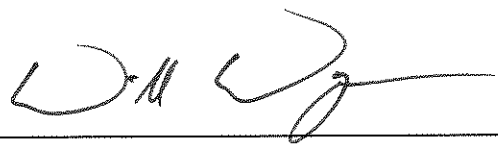
Respectfully Submitted by the House Appropriations Subcommittee on Health & Human Resources:


  
C. Matthew Fariss, Chair

  
Emily M. Brewer


  
M. Keith Hodges

  
Carrie E. Coyner

  
William C. Wampler, III

  
Mark D. Sickles

  
Betsy B. Carr

  
Sam Rasoul

\* objection: Item 294 Para. F1234, in HB30.





**Health and Human Resources Amendments**

HB 29  
2020-22  
TOTAL  
FTE

HB 29  
2020-22  
General Fund      Nongeneral Fund

**HB 29**

**Department of Health**

Information on Health Care Scholarship & Loan Repayment Programs  
Distribution of VISSTA COVID Testing Funds

**Department of Medical Assistance Services**

Public health emergency and other FMAP Changes  
Review of Medicaid Developmental Disability Waiver Rate Study  
Capture Savings from Delay in Allocating Medicaid Waivers

**Department of Social Services**

Provide GF for Unemployed Parents Program  
Capture Balances in Auxiliary Grant Program  
Capture FMAP Savings in Child Welfare  
Reflect TANF Expenditures for Cornerstones  
Reflect TANF Expenditures for FACETS  
Reflect TANF Expenditures for United Community

Language			
Language			
\$	302,186,181	\$	1,367,138,267
\$	Language (12,571,908)	\$	(12,571,908)
\$	3,000,000		
\$	Language (2,734,777)	\$	2,734,777
	Language	\$	(150,000)
	Language	\$	(250,000)
	Language	\$	(784,000)



**Health and Human Resources Amendments**

**HB 30  
2022-24  
TOTAL  
FTE**

**HB 30  
2022-24  
General Fund      Nongeneral Fund**

**HB 30**

**Secretary of Health and Human Resources**

Aging Workgroup and Plan to Elevate Aging Services  
Virginia Task Force on Primary Care

**Department of Health**

Nursing Scholarships and Loan Repayment Programs  
Eliminate new GF for Virginia Health Workforce Development Authority  
Supplant GF with TANF for Resource Mothers Program  
Defer funding for Marijuana Prevention and Education until FY 2024  
Edmarc's Children's Hospice  
Southwest Virginia Health Care Authority  
Town of Goshen Water Storage Tank  
Provide Support for the Office of Drinking Water  
Continue Workgroup Examining Certain Substances in Drinking Water  
Eliminate funding for Integrated E-Referral System  
Allocation of Additional Trauma Center Funding

**Department of Medical Assistance Services**

Medicaid Mobile Vision Pilot Program  
HB 680 - Brain Injury Medicaid Targeted Case Management Services  
Add Funding for Medicaid Value Based Purchasing Program for Nursing Homes  
Nursing Home Quality Improvement Program  
HB 241 - Medicaid Coverage for Customized Wheelchairs  
Medicaid Savings from FMAP Changes and Advancing Payments to FY 2022  
HB 1046 - Plan to Allow Direct Purchase of OTC Medications  
Comprehensive Plans of Care for Children in Residential Facilities  
Medicaid Reimbursement for Virginia Home Nursing Facility  
Extend 12.5% Temporary Rate Increase for Community Mental Health Providers  
Rebase Medicaid DD Waiver Rates for Additional Services  
Indirect Medical Education Funding for Children's Hospital of The King's Daughters  
Provide Rate Increase for Medicaid Adult Day Care Providers  
Rebasing Rates for Psychiatric Residential Treatment Facilities

	\$			\$	
Language					
	1,325,500				
	\$			\$	
	2,000,000				
	(1,100,000)				
	\$			\$	
	(2,000,000)				
	(3,960,000)				
	\$			\$	
	2,500,000				
	225,000				
	\$				
	150,000				
	\$				
	3,667,010				
	\$				
	60,000				
	\$				
	(16,000,000)				
Language					
	\$			\$	
	808,954				
	\$			\$	
	3,466,329				
	\$			\$	
	50,000,000				
Language					
	\$			\$	
	4,710,908				
	\$			\$	
	(417,393,289)				
	\$			\$	
	150,000				
Language					
	\$			\$	
	5,149,090				
	\$			\$	
	36,599,000				
	\$			\$	
	81,248,184				
	\$			\$	
	8,145,507				
	\$			\$	
	847,267				
Language					

<b>HB 30</b> <b>2022-24</b> <b>TOTAL</b> <b>FTE</b>
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<b>HB 30</b> <b>2022-24</b> <b>General Fund</b>	<b>Nongeneral Fund</b>
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<b>Health and Human Resources Amendments</b>
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**HB 30**

Allow Medicaid Payments for Parents to be Caregivers of Eligible Minor Children  
 Medicaid Managed Care Vision Services  
 Telehealth Services & Virtual Learning Services in Medicaid DD Waiver Program  
 Remove Study Language on Human Donor Milk

**Department of Behavioral Health and Developmental Services**

Defer New Licensing Positions				
Comprehensive Study of Behavioral Health System				
Delay Marijuana Prevention Media Campaign				
Enhanced Monitoring of Credentialed Recovery Homes				
Northwestern Crisis Response Center				
Reduce New Funds for Recovery Residences	\$	(2,661,362)	\$	(867,120)
Reduce Increase for Mental Health Access Program	\$	(1,000,000)		
Prince William Crisis Receiving Center	\$	(1,012,286)		
Add First Year Funding for Alternative Custody	\$	2,500,000		
Provide Start-up Funding for Southwest Virginia Crisis Receiving Center	\$	(2,000,000)		
Expand Use of Medication Assisted Treatment	\$	(2,862,200)		
Jails Discharge Planning for Persons with Serious Mental Illness	\$	2,500,000		
Modify Increase for Permanent Supportive Housing	\$	2,000,000		
Provide ARPA in First Year for STEP-Virginia	\$	2,500,000		
Chesapeake Regional Healthcare 20-bed Psychiatric Unit	\$	Language		
	\$	Language		
	\$	(15,150,000)		
	\$	(22,245,501)	\$	22,245,501
	\$	3,100,000		
	\$	1,700,000		

**Department for Aging and Rehabilitative Services**

Independent Living Services

**Department of Social Services**

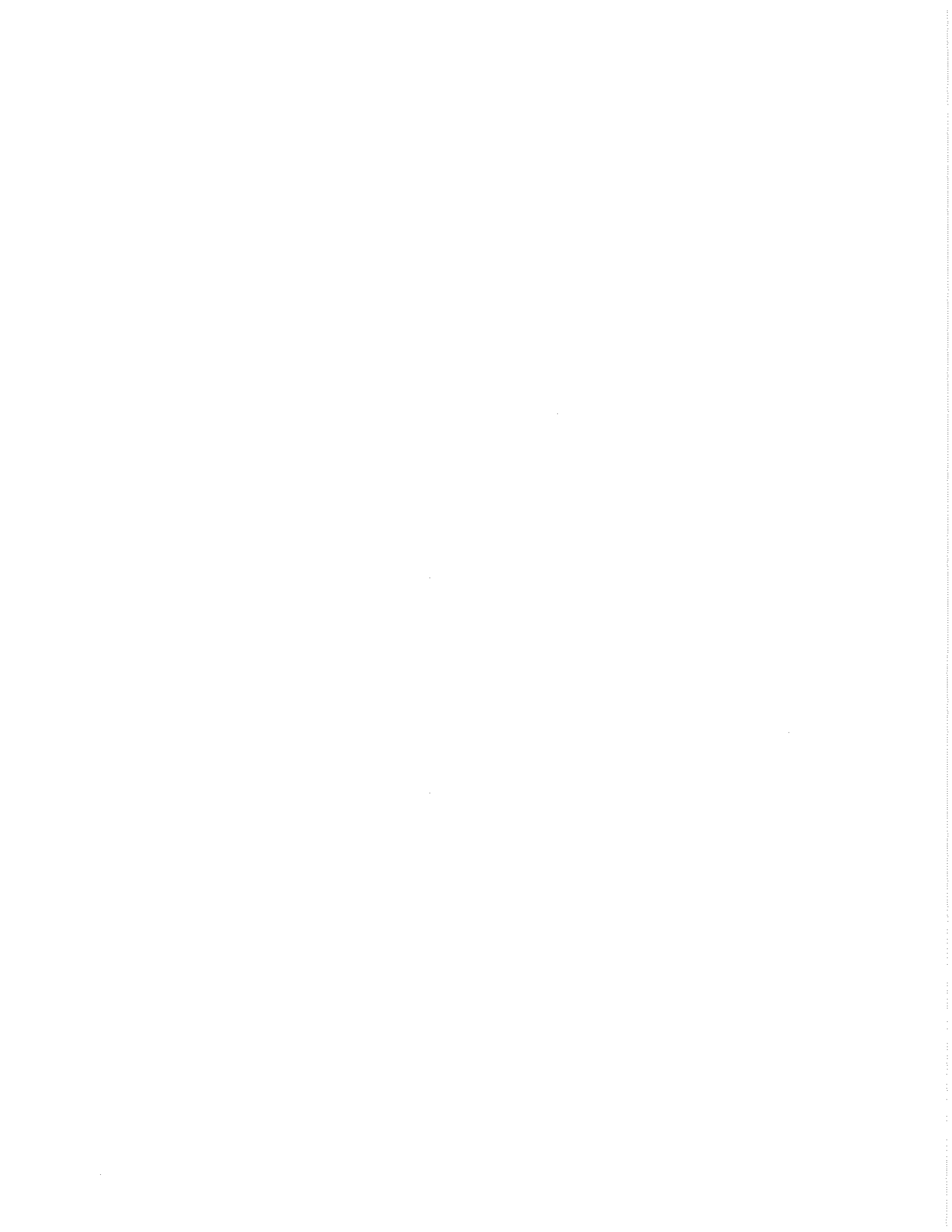
Eliminate New Initiative: Public Benefit Navigator Pilot Program  
 Reduce Proposed Funding for Sexual and Domestic Violence Prevention Fund  
 iFoster Care Portal  
 HB 349 - Foster Care Housing Support  
 Adjust FMAP In Child Welfare Program  
 Community Action Agencies  
 Good Shepherd Housing and Family Services

Health and Human Resources Amendments

HB 30 2022-24 General Fund	HB 30 2022-24 Nongeneral Fund	HB 30 2022-24 TOTAL FTE
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HB 30

Northern Virginia Family Services	\$	1,000,000		
TANF for Children's Advocacy Services		Language	\$	1,879,000
Reflect TANF Expenditures for United Community		Language	\$	(1,400,000)
Reflect TANF Expenditures for Cornerstones		Language	\$	(300,000)
Reflect TANF Expenditures for FACETS		Language	\$	(500,000)
Delay Replacement of Virginia Case Management System (VaCMS)	\$	(11,090,638)	\$	(35,809,362)
<b>Department for the Blind and Vision Impaired</b>				
Radio Reading Services	\$	250,000		
<b>Central Appropriations</b>				
Eliminate Funding for Unidentified Behavioral Health Services	\$	(100,000,000)	\$	250,000
Provide ARPA for Emergency Department Pilot Program			\$	9,718,539
Provide ARPA for Pandemic Expenses at Local Government-Owned Nursing Homes			\$	17,705,803
Increase Health Dept. NGF Appropriations for COVID-Related Issues			\$	13,000,000
Provide ARPA to the Trauma Center Fund in FY 2023				
<b>State Corporation Commission</b>				
Review of Essential Health Benefits		Language		



TANF Budget	HAC Recommendation		
	HB 29 FY 2022	HB 30 FY 2023	HB 30 FY 2024
<b>TANF Program (Mandated Services)</b>			
Income Benefits (including forecast)	\$37,519,327	\$37,519,327	\$37,519,327
Revise TANF Full Employment Program	\$2,504,815	\$2,499,652	\$2,499,652
TANF Individual Development Accounts	\$2,120,420	\$2,120,420	\$2,120,420
VIEW Employment Services	\$9,000,000	\$9,000,000	\$9,000,000
VIEW Child Care Services (including forecast)	\$2,659,033	\$2,659,033	\$2,659,033
Caseload Reserve	\$1,000,000	\$1,000,000	\$1,000,000
TANF State/Local Operations	\$56,910,707	\$56,910,707	\$56,910,707
<b>Mandated Services Subtotal</b>	<b>\$111,714,302</b>	<b>\$111,709,139</b>	<b>\$111,709,139</b>
<b>Expanded Services (Discretionary Activities)</b>			
Healthy Families/Health Start (DSS)	\$9,035,501	\$9,035,501	\$9,035,501
Community Action Agencies	\$7,750,000	\$8,750,000	\$8,750,000
Domestic Violence Grants	\$3,846,792	\$3,846,792	\$3,846,792
EITC Grants	\$185,725	\$185,725	\$185,725
Comprehensive Health Investment Project	\$2,400,000	\$2,400,000	\$2,400,000
Boys and Girls Clubs	\$2,000,000	\$2,000,000	\$2,000,000
Resource Mothers	\$1,000,000	\$1,000,000	\$1,000,000
Child advocacy centers (CACs)	\$1,136,500	\$2,136,500	\$2,136,500
Northern Virginia Family Services (NVFS)	\$2,000,000	\$2,000,000	\$2,000,000
Virginia Early Childhood Foundation (VECF)	\$1,250,000	\$1,250,000	\$1,250,000
Long Acting Reversible Contraceptives (LARC) (at VDH)	\$4,000,000	\$4,000,000	\$4,000,000
Early Impact Virginia (home visiting)	\$600,000	\$600,000	\$600,000
Visions of Truth	\$75,000	\$75,000	\$75,000
Grants for Community Employment & Training	\$12,000,000	\$9,000,000	\$9,000,000
Laurel Center	\$750,000	\$750,000	\$750,000
FACETS	\$100,000	\$100,000	\$100,000
Two-Generation/Whole Family Pilot	\$1,125,000	\$1,125,000	\$1,125,000
Federation of Virginia Food Banks	\$3,000,000	\$3,000,000	\$3,000,000
Transit passes	\$1,000,000	\$500,000	\$500,000
United Community	\$500,000	\$500,000	\$500,000
Increase in relative support payments	\$8,457,600	\$0	\$0
Lighthouse	\$100,000	\$100,000	\$100,000
Emergency and diversionary assistance	\$139,935	\$139,935	\$139,935
Cornerstones	\$600,000	\$600,000	\$600,000
Family Restoration Services in Hampton	\$125,000	\$125,000	\$125,000
Portsmouth Volunteers for the Homeless	\$250,000	\$250,000	\$250,000
Menchville House	\$125,000	\$125,000	\$125,000
Good Shepherd Housing and Family Services	\$200,000	\$200,000	\$0
Lorton Community Action Center	\$200,000	\$0	\$0
BritePaths	\$200,000	\$0	\$0
Visions of Youth STRIVE program	\$75,000	\$75,000	\$75,000
Koinonia	\$200,000	\$0	\$0
VaCMS funding, local staff and operations increases	\$4,085,056	\$6,219,628	\$9,904,003

TANF Budget	HAC Recommendation		
	HB 29 FY 2022	HB 30 FY 2023	HB 30 FY 2024
Expanded Services Subtotal	\$68,512,109	\$60,089,081	\$63,573,456
<b>Other Spending (Cost Avoidance)</b>			
At-Risk Child Care	\$12,857,212	\$0	\$0
Head Start Wraparound	\$2,500,000	\$0	\$0
Local Staff Support	\$6,405,502	\$6,405,502	\$6,405,502
Comprehensive Services Act Transfer	\$9,419,998	\$9,419,998	\$9,419,998
Other Spending Subtotal	\$31,182,712	\$15,825,500	\$15,825,500
<b>Total TANF Budget</b>	<b>\$211,409,123</b>	<b>\$187,623,720</b>	<b>\$191,108,095</b>
Annual Grant	\$157,762,831	\$157,762,831	\$157,762,831
Prior Year Balance	\$130,397,626	\$76,751,334	\$46,890,445
Annual Balance/(Shortfall)	\$76,751,334	\$46,890,445	\$13,545,181



*Committee Approved Amendments to House Bill 29, as Introduced*

Item 295 #1h

**Health and Human Resources**

Department of Health

Language

**Language:**

Page 118, line 26, strike "Not set out." and insert:

"F. The Virginia Department of Health shall publish on its website information about all health and behavioral health care scholarship and loan repayment programs so that information is readily available to the public. In addition, the department shall notify nursing schools and nursing programs throughout the Commonwealth no later than May 1, 2022 of the availability of nursing scholarship and loan repayment program funding for the 2022-2023 academic year, including information about the Nursing Preceptor Incentive Program."

**Explanation:**

(This amendment directs the Virginia Department of Health to publicize information about all health care scholarship and loan repayment programs on its website and notify nursing schools and programs of available nursing scholarship and loan repayment programs no later than May 1, 2022 for the 2022-2023 academic year. It is the intent of the General Assembly that language in this item be set out during enrolling of the bill.)

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Item 299 #1h

**Health and Human Resources**

Department of Health

Language

**Language:**

Page 118, line 30, strike "Not set out." and insert:

"Q. The Department of Health shall allow federal funds allocated for the VISSTA COVID testing program to be made available to localities or school divisions that request funding to contract with a vendor directly to implement a school testing program."

**Explanation:**

(This amendment adds language providing more flexibility in the use of school COVID testing funds. Some school divisions and localities would prefer to develop their own contracts with local labs to expedite COVID testing and results.)

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Item 313 #1h

**Health and Human Resources**

**FY20-21**

**FY21-22**

*Committee Approved Amendments to House Bill 29, as Introduced*

Department of Medical Assistance Services	\$0	\$302,186,181	GF
	\$0	\$1,367,138,267	NGF

**Language:**

Page 122, line 20, strike "\$18,170,277,935" and insert "\$19,839,602,383".

**Explanation:**

(This amendment adds \$302.2 million from the general fund and \$1.4 billion nongeneral fund from federal Medicaid matching funds in fiscal year 2022, reflecting a shift in payments from the first month of fiscal year 2023 to fiscal year 2022. This change allows the Commonwealth to draw down enhanced federal Medicaid funding (FMAP) during the public health emergency. A separate amendment to House Bill 30 reduces general fund spending on Medicaid by \$378.0 million in fiscal year 2023 and \$39.3 million in fiscal year 2024 reflecting the shift in spending from fiscal year 2023 to fiscal year 2022. This amendment also accounts for a slower than expected shift of certain Medicaid recipients in the base program into Medicaid expansion (e.g., adolescents turning age 18). The Medicaid forecast had anticipated a savings of \$35.0 million from this action in fiscal year 2022. However, issues related to the performance of the contracted Medicaid processing unit have delayed these eligibility updates. This amendment results in no change in services provided to Medicaid recipients.)

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Item 313 #2h

**Health and Human Resources**

Department of Medical Assistance Services

Language

**Language:**

Page 160, after line 18, insert:

"PPPPPP. The Department of Medical Assistance Services, in consultation with the Department of Behavioral Health and Developmental Services, shall review the most recently completed rate study report for Developmental Disability waiver services and shall examine utilization data between April 1, 2021 and March 31, 2022. The department shall make rate model changes to model assumptions as appropriate and consistent with efficiency, economy, quality and sufficiency of care. New rates shall be effective July 1, 2022 for services authorized in House Bill 30. The cost estimate shall incorporate projections for future utilization and shall be reported to the Chairmen of the House Appropriations and Senate Finance and Appropriations Committees by June 15, 2022. The department shall submit any necessary requests to amend waivers, State Plan changes or regulatory documents."

**Explanation:**

(This amendment adds language directing the Department of Medical Assistance Services to

**Committee Approved Amendments to House Bill 29, as Introduced**

review the recently completed rate study report for Developmental Disability waiver services in consultation with the Department of Behavioral Health and Developmental Services for rates to be effective July 1, 2022 and make changes as appropriate to model assumptions. A report shall be made to the Chairs of the money committees by June 15, 2022.)

Item 313 #3h

<b>Health and Human Resources</b>	<b>FY20-21</b>	<b>FY21-22</b>	
Department of Medical Assistance Services	\$0	(\$12,571,908)	GF
	\$0	(\$12,571,908)	NGF

**Language:**

Page 122, line 20, strike "\$18,170,277,935" and insert "\$18,145,134,119".

Page 126, line 22, strike "25,143,816" and insert "12,571,908".

Page 126, line 23, strike "25,143,816" and insert "12,571,908".

Page 126, after line 45, insert:

"e. The Department of Medical Assistance Services, in consultation with the Commissioner, Department of Behavioral Health and Developmental Services, and the Virginia Association of Community Services Boards, shall ensure that any new waiver slots included in House Bill 30 are allocated to Community Services Boards (CSBs) and a Behavioral Health Authority no later than May 31, 2022 and CSBs and a Behavioral Health Authority will assign each slot to eligible individuals no later than June 30, 2022 to ensure individuals on the Priority One waiting list can access services expeditiously in fiscal year 2023."

**Explanation:**

(This amendment captures savings of \$12.6 million from the general fund and \$12.6 million from federal Medicaid matching funds the second year from the fiscal year 2022 delay by the Department of Behavioral Health and Developmental Services (DBHDS) in allocating waiver slots. A decision by DBHDS to review all individuals on the Priority 1, 2 and 3 waiting lists resulted in a delay in allocating 890 new waiver slots to individuals with developmental disabilities on the Priority 1 waiting list for community-based services. This delay resulted in projected savings in the program in fiscal year 2022. Budget language is added requiring the Department of Medical Assistance Services, DBHDS and CSBs to ensure that 1,200 new waiver slots contained in House Bill 30 will be available expeditiously for individuals with developmental disabilities.)

Item 350 #1h

<b>Health and Human Resources</b>	<b>FY20-21</b>	<b>FY21-22</b>	
Department of Social Services	\$0	\$3,000,000	GF

**Language:**

*Committee Approved Amendments to House Bill 29, as Introduced*

Page 178, line 6, strike "\$152,165,798" and insert "\$155,165,798".

**Explanation:**

(This amendment adds \$3.0 million from the general fund in the second year to the Unemployed Parents (UP) program to address a recent increase of enrollment in the program.)

---

Item 353 #1h

**Health and Human Resources**

Department of Social Services

Language

**Language:**

Page 184, after line 30, insert:

"G. The Director, Department of Planning and Budget, shall unallot \$2,000,000 the second year from this item which reflects unused balances in the Auxiliary Grant program."

**Explanation:**

(This amendment adds language to capture \$2.0 million in balances the second year in the Auxiliary Grant program within the Department of Social Services.)

---

Item 354 #1h

**Health and Human Resources**

**FY20-21**

**FY21-22**

Department of Social Services

\$0

(\$2,734,777) GF

\$0

\$2,734,777 NGF

**Language:**

**Explanation:**

(This amendment reduces general fund spending by \$2.7 million the second year for adoption assistance, foster care and the KinGAP programs due to changes in the federal medical assistance percentage (FMAP) from the extension of the Public Health Emergency into the fourth quarter of fiscal year 2022. The FMAP will be 56.2 percent compared to the pre-pandemic rate of 50 percent for these services, allowing for a temporary reduction in general fund spending.)

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Item 356 #1h

**Health and Human Resources**

**FY20-21**

**FY21-22**

*Committee Approved Amendments to House Bill 29, as Introduced*

Department of Social Services	\$0	(\$150,000)	NGF
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**Language:**

Page 188, line 27, strike "\$70,166,967" and insert "\$70,016,967".

Page 192, line 40, after "and", strike "750,000" and insert "600,000".

**Explanation:**

(This amendment reduces \$150,000 the second year in Temporary Assistance to Needy Families funding for Cornerstones to better reflect expected expenditures by this organization.)

---

Item 356 #2h

<b>Health and Human Resources</b>	<b>FY20-21</b>	<b>FY21-22</b>	
Department of Social Services	\$0	(\$250,000)	NGF

**Language:**

Page 188, line 27, strike "\$70,166,967" and insert "\$69,916,967".

Page 192, line 1, strike "350,000" and insert "100,000".

**Explanation:**

(This amendment reduces \$250,000 the second year in Temporary Assistance to Needy Families funding for FACETS to better reflect expected expenditures by this organization.)

---

Item 356 #3h

<b>Health and Human Resources</b>	<b>FY20-21</b>	<b>FY21-22</b>	
Department of Social Services	\$0	(\$784,000)	NGF

**Language:**

Page 188, line 27, strike "\$70,166,967" and insert "\$69,382,967".

Page 192, line 17, strike "1,284,000" and insert "500,000".

**Explanation:**

(This amendment reduces \$784,000 the second year in Temporary Assistance to Needy Families funding for United Community to better reflect expected expenditures by this organization.)

---



*Committee Approved Amendments to House Bill 30, as Introduced*

Item 283 #1h

**Health and Human Resources**

Secretary of Health and Human Resources

Language

**Language:**

Page 289, after line 42, insert:

"F. The Secretary of Health and Human Resources shall continue the effort previously established in Chapter 552, 2021 Acts of Assembly, Special Session I to elevate aging services in the Commonwealth. The Secretary, or his designee, shall convene a workgroup that includes representatives from the Department for Aging and Rehabilitative Services, Area Agencies on Aging, the Virginia Association of Area Agencies on Aging, the Department of Planning and Budget, the Division of Legislative Services, appropriate staff from the House Appropriations and Senate Finance and Appropriations Committees, and other appropriate stakeholders. In addition, the workgroup shall include one member from the House of Delegates appointed by the Speaker, and one member from the Senate, appointed by the Committee on Rules, and shall seek outside expertise, as necessary. The workgroup shall develop an implementation plan for aging services consistent with the **Report of the Virginia Aging Services Work Group (RD37)** published in December 2021. The workgroup shall report their recommendations on the plan to the Governor, the Department of Planning and Budget, and the Chairs of House Appropriations and Senate Finance and Appropriations Committees no later than September 1, 2022."

**Explanation:**

(This amendment adds budget language requiring the continuation of a workgroup created during the 2021 Session to evaluate and elevate aging services in the Commonwealth. Language requires the development of an implementation plan no later than September 1, 2022.)

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Item 283 #2h

**Health and Human Resources**

**FY22-23**

**FY23-24**

Secretary of Health and Human Resources

\$508,750

\$816,750 GF

**Language:**

Page 288, line 3, strike "\$903,270" and insert "\$1,412,020".

Page 288, line 3, strike "\$903,270" and insert "\$1,720,020".

Page 289, line 34, after "shall" insert:

"contract with the Virginia Center for Health Innovation for actions necessary to facilitate and".

Page 289, line 34, strike "Governor's" and insert "Virginia".

*Committee Approved Amendments to House Bill 30, as Introduced*

**Explanation:**

(This amendment provides \$508,750 the first year and \$816,750 the second year from the general fund for the Secretary of Health and Human Resources to contract with the Virginia Center for Health Innovation for actions necessary to facilitate and support the Virginia Task Force on Primary Care in years three and four of the Governor's Task Force on Primary Care. It also changes the name to the Virginia Task Force on Primary Care.)

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Item 287 #1h

**Health and Human Resources**

**FY22-23**

**FY23-24**

Department of Health

\$1,000,000

\$1,000,000 GF

**Language:**

Page 295, line 8, strike "\$5,860,000" and insert "\$6,860,000".

Page 295, line 8, strike "\$5,860,000" and insert "\$6,860,000".

Page 296, after line 20, insert:

"E.1. Out of this appropriation, \$1,000,000 the first year and \$1,000,000 the second year from the general fund shall be used to fund nursing scholarship and loan repayment programs to recruit and retain nurses and nurse faculty, consistent with § 32.1-122.6:01 of the Code of Virginia and the Nursing Preceptor Incentive Program established in Chapter 552, 2021 Special Session I, Acts of Assembly.

2. Of the appropriation in paragraph E.1., \$64,000 the first year and \$64,000 the second year from the general fund shall be provided to fund the Long-Term Facility Nursing Scholarship, authorized in § 54.1-3011.2, *Code of Virginia*. The program shall offer a scholarship for any Virginia student accepted for enrollment or enrolled in an approved education program in the Commonwealth of Virginia to become a certified nurse aide, licensed practical nurse, or registered nurse, and who commits to work in a long-term care facility after graduation. For each year of scholarship money received, the participant agrees to engage in the equivalent of one year of full-time nursing practice in a long-term care facility in the Commonwealth."

**Explanation:**

(This amendment provides \$1.0 million from the general fund each year to fund nursing scholarship and loan repayment programs established in the the Virginia Department of Health (VDH) to assist in recruiting new nurses and nursing faculty into the profession to address significant shortages. Language sets out specific funding amounts for the Long-Term Facility Nursing Scholarship to fund scholarships for students who commit to work in certified nursing facilities and nursing homes. The funding will support 32 nursing students receiving \$2,000 scholarships each year. The Long-Term Facility Nursing Scholarship was established in 2016 but has not received any funding to award scholarships to students.)



*Committee Approved Amendments to House Bill 30, as Introduced*

Item 292 #1h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Health	(\$800,000)	(\$300,000)	GF

**Language:**

Page 299, line 41, strike "\$38,137,213" and insert "\$37,337,213".  
Page 299, line 41, strike "\$22,881,547" and insert "\$22,581,547".  
Page 300, strike lines 32 through 45.

**Explanation:**

(This amendment eliminates \$300,000 from the general fund each year for operating costs at the Virginia Health Workforce Development Authority and \$500,000 from the general fund the first year for the Authority to convene a workgroup to study primary care workforce issues. Funding will instead be used to support the Virginia Center for Health Innovation's work supporting the Virginia Task Force on Primary Care and the Health Workforce Development Fund established in House Bill 191 that will be used to provide grants and incentives to address the Commonwealth's current health workforce issues.)

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Item 293 #1h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Health	(\$1,000,000)	(\$1,000,000)	GF
	\$1,000,000	\$1,000,000	NGF

**Language:**

Page 301, line 25, strike "general fund" and insert:  
"federal TANF block grant".

**Explanation:**

(This amendment reduces general fund support for the Resource Mothers Program and replaces it with federal TANF block grant funds that have historically supported this program whose main goal is to improve birth outcomes for teens and their infants.)

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Item 293 #2h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Health	(\$2,200,000)	(\$1,760,000)	GF

**Language:**

*Committee Approved Amendments to House Bill 30, as Introduced*

Page 300, line 46, strike "\$166,549,331" and insert "\$164,349,331".  
Page 300, line 46, strike "\$166,549,331" and insert "\$164,789,331".

**Explanation:**

(This amendment reduces \$2.2 million the first year and \$1.8 million the second year from the general fund in the introduced budget for marijuana prevention and education. The revised amendment provides \$40,000 the first year for a study of marijuana usage and \$480,000 the second year from the general fund for a more modest marijuana prevention and education campaign, deferring action on additional prevention and education activities until the Commonwealth begins to collect revenues from the sale of marijuana.)

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	Item 295 #1h	
<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>
Department of Health	\$1,250,000	\$1,250,000 GF

**Language:**

Page 305, line 2, strike "\$23,498,673" and insert "\$24,748,673".  
Page 305, line 2, strike "\$22,998,673" and insert "\$24,248,673".  
Page 309, line 8, strike "\$500,000" and insert: "\$1,750,000".  
Page 309, line 8, after "first year", insert:  
"and \$1,250,000 the second year".

**Explanation:**

(This amendment adds \$1,250,000 each year from the general fund to support a public-private partnership that would build out and expand children's hospice services into Williamsburg and adjacent counties. Edmarc Children's Hospice provides pediatric hospice and home care to children with life-threatening illnesses. This funding will add to \$500,000 GF the first year contained in House Bill 30 for this organization.)

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	Item 295 #2h	
<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>
Department of Health	\$225,000	\$0 GF

**Language:**

Page 305, line 2, strike "\$23,498,673" and insert "\$23,723,673".  
Page 309, after line 15, insert:  
"X. Out of this appropriation, \$225,000 from the general fund the first year shall be provided to the Southwest Virginia Health Authority."

*Committee Approved Amendments to House Bill 30, as Introduced*

**Explanation:**

(This amendment adds \$225,000 from the general fund the first year for the operational expenses of the Southwest Virginia Health Authority. Funding will be used to support the implementation of population health programs and initiatives by the addition of a part-time employee, website development and other expenses to support the Authority's work.)

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Item 295 #3h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>
Department of Health	\$150,000	\$0 GF

**Language:**

Page 305, line 2, strike "\$23,498,673" and insert "\$23,648,673".

Page 309, after line 15, insert:

"X. Out of this appropriation, \$150,000 from the general fund the first year shall be provided to the Town of Goshen for repairs to their water storage tank."

**Explanation:**

(This amendment is self-explanatory.)

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Item 296 #1h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>
Department of Health	\$1,833,505	\$1,833,505 GF

**Language:**

Page 309, line 16, strike "\$37,678,013" and insert "\$39,511,518".

Page 309, line 16, strike "\$37,678,013" and insert "\$39,511,518".

**Explanation:**

(This amendment adds \$1.8 million from the general fund each year to maintain current staffing within the Office of Drinking Water.)

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Item 296 #2h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>
Department of Health	\$60,000	\$0 GF

**Language:**

*Committee Approved Amendments to House Bill 30, as Introduced*

Page 309, line 16, strike "\$37,678,013" and insert "\$37,738,013".

**Explanation:**

**Explanation**

(This amendment provides \$60,000 the first year from the general fund for the continuation of the Commissioner of Health's workgroup to examine the occurrence of contaminants in public drinking water.)

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Item 299 #1h

**Health and Human Resources**

**FY22-23**

**FY23-24**

Department of Health

(\$8,000,000)

(\$8,000,000) GF

**Language:**

Page 310, line 14, strike "\$37,054,307" and insert "\$29,054,307".

Page 310, line 14, strike "\$37,054,307" and insert "\$29,054,307".

Page 311, strike lines 19 through 23.

Page 311, line 24, strike "H." and insert "G."

**Explanation:**

(This amendment removes \$8.0 million from the general fund each year for an information technology system designed to connect government agencies, health care providers, and community-based partners to facilitate referrals for public health and social services.)

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Item 299 #2h

**Health and Human Resources**

Department of Health

Language

**Language:**

Page 311, after line 26, insert:

"I. The Commissioner of the Department of Health shall allocate \$13.0 million from the American Rescue Plan Act (ARPA) in fiscal year 2023 for trauma centers that are funded through the Trauma Center Fund, established in § 18.2-270.01 of the Code of Virginia. Allocations shall be consistent with the formula used for the Fund, except that this one-time allocation of federal ARPA dollars shall be distributed only to those hospitals in which the number of individuals subject to Temporary Detention Orders served by the hospital have increased since fiscal year 2014."

*Committee Approved Amendments to House Bill 30, as Introduced*

**Explanation:**

(This amendment requires the Commissioner of Health to allocate additional funding from the American Rescue Plan Act (ARPA) to hospitals with trauma centers funded through the Trauma Center Fund that can document they have served an increasing number of individuals subject to Temporary Detention Orders since fiscal year 2014. A one-time appropriation of \$13.0 million from ARPA funds the first year is provided in Item 486.)

Item 304 #1h

**Health and Human Resources**

	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Medical Assistance	\$386,177	\$422,777	GF
Services	\$485,837	\$295,637	NGF
	2.00	2.00	FTE

**Language:**

Page 313, line 47, strike "\$18,732,988,737" and insert "\$18,733,860,751".

Page 313, line 47, strike "\$19,820,607,534" and insert "\$19,821,325,948".

Page 340, after line 10, insert:

"PPPP.1. Effective July 1, 2022, the Department of Medical Assistance Services (DMAS) shall issue a Request for Proposal and implement a two-year mobile vision provider pilot program. The pilot program will identify at least two mobile vision providers to provide comprehensive vision care services to children in school-based settings as provided in this paragraph. The pilot will evaluate the health and financial outcomes in at least one urban/suburban area and at least one rural area. To cover these services for children enrolled with a Medicaid managed care organization (MCO), the Department shall revise its MCO contracts to require the pilot mobile vision providers to participate in MCO networks as participating providers and receive additional subsidy to cover the cost of services for uninsured/underinsured students and general administrative and operational costs connected with mobile service provision. Mobile vision providers participating in the pilot program are responsible for facilitating data matching activities in order to identify Medicaid and Family Access to Medical Insurance Security (FAMIS) eligible children and bill their assigned MCOs for eligible services provided.

2. Mobile vision providers shall provide comprehensive vision services including, at a minimum, a comprehensive vision exam in compliance with recognized clinical standards to include the use of wide angle technology, lenses, frames, and fittings.

3. In order to participate in the pilot, a mobile vision provider shall have a written agreement with the school or school division where such services are provided. The agreement shall establish (i) how children will be referred for school-located vision services, (ii) a mechanism for ensuring parental or legal guardian notification, and (iii) a referral process for children needing follow up care. Such services shall be provided by a Virginia-licensed optometrist or ophthalmologist employed by or under contract with the mobile vision provider.

*Committee Approved Amendments to House Bill 30, as Introduced*

4. To demonstrate the impact that school-based mobile vision providers have on children enrolled in Medicaid and FAMIS, such mobile vision providers shall participate in an independent evaluation of the pilot in its second year. The Department of Medical Assistance Services is authorized to submit any appropriate federal regulatory documentation necessary to support implementation of this paragraph. This language does not exempt mobile vision providers under this paragraph from complying with all relevant federal, state, and DMAS provider requirements.

5. The Department of Medical Assistance Services shall require the Medicaid MCOs to expedite the enrollment and credentialing of the pilot mobile vision providers in the MCO networks."

**Explanation:**

(This amendment adds funding, language and two positions within the Department of Medical Assistance Services (DMAS) to begin a two-year pilot program for Medicaid and Family Access to Medical Insurance Security (FAMIS) coverage of mobile vision clinics in school-based settings. Eye exams and glasses provided at "bricks and mortar" optometry practices are currently covered by Medicaid and FAMIS. This budget amendment does not expand Medicaid benefits or services, instead it establishes an alternative delivery model to provide currently covered services in a way that increases access for children. It is intended that the comprehensive vision exam described in the language allows for the use of wide angle technology that bypasses the need for dilation of the eye. The two positions at DMAS will develop and administer the pilot program. Funding is included to cover children who are uninsured or underinsured, and to complete an independent evaluation of the program. A companion amendment in this item requires the department to work with the managed care organizations to offer a variety of lens and frame options for children. It is the intent of the General Assembly that in the enrolling of this act, funding included in this item shall be allocated among appropriate items within DMAS.)

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Item 304 #2h

**Health and Human Resources**

Department of Medical Assistance  
Services

**FY22-23**

\$385,624  
\$418,025

**FY23-24**

\$461,643 GF  
\$502,735 NGF

**Language:**

Page 313, line 47, strike "\$18,732,988,737" and insert "\$18,733,792,386".

Page 313, line 47, strike "\$19,820,607,534" and insert "\$19,821,571,912".

Page 340, after line 10, insert:

"PPPP. Effective July 1, 2022, the Department of Medical Assistance Services shall increase the rates for Medicaid adult day services by 12.5 percent. The department shall have the authority to implement these changes prior to completion of any regulatory process undertaken in order to effect such change."

*Committee Approved Amendments to House Bill 30, as Introduced*

**Explanation:**

(This amendment adds funding and language to make permanent the fiscal year 2022 temporary 12.5 percent Medicaid rate increase for adult care services.)

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Item 304 #3h

**Health and Human Resources**

Department of Medical Assistance Services

Language

**Language:**

Page 339, line 47, after "ceiling.", insert:

"The department shall have the authority to update the cost report form provided for in the Virginia Administrative Code to reflect updated changes to the meet the agency needs for rebasing PRTF and ARTS provider reimbursement rates."

**Explanation:**

(This amendment adds language providing the Department of Medical Assistance Services the authority to update the cost report form contained in the Virginia Administrative Code and to reflect changes needed to meet agency needs for collecting needed data on cost reports in order to rebase psychiatric residential treatment facilities (PRTFs) and Addiction and Rehabilitation Treatment Services (ARTS) provider reimbursement rates by July 1, 2023.)

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Item 304 #4h

**Health and Human Resources**

Department of Medical Assistance Services

Language

**Language:**

Page 340, after line 10, insert:

"PPPP. Pending approval by the Centers for Medicare and Medicaid Services (CMS), the Department of Medical Assistance Services shall allow legally responsible individuals (parents of children under age 18 and spouses) to provide personal care/personal assistance services and be paid for those services when circumstances prevent an individual from being cared for by a non-parent caregiver. Any legally responsible individual who is a paid aide or attendant for personal care/personal assistance services shall meet all the same requirements as other aides or attendants. DMAS shall promulgate emergency regulations for the continuation of parents/spouses as personal care/personal assistance providers."

**Explanation:**

*Committee Approved Amendments to House Bill 30, as Introduced*

(This amendment adds language to extend the provision of Medicaid reimbursement of parents/spouses of Medicaid eligible minor children to provide personal care/personal assistance services that have been available during the pandemic through a Medicaid Appendix K waiver and approved by the federal government.)

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Item 304 #5h

**Health and Human Resources**

Department of Medical Assistance Services

Language

**Language:**

Page 339, line 32, after "MMMM.", insert "1."

Page 339, after line 36, insert:

"2. DMAS shall work with managed care organizations to ensure that a variety of lens and frames are available to children receiving vision services."

**Explanation:**

(This amendment adds language to a proposed rate increase of 30 percent for Medicaid vision services, for the Department of Medical Assistance Services to work with managed care organizations to ensure that a variety of lens and frames are available to children receiving vision services.)

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Item 304 #6h

**Health and Human Resources**

Department of Medical Assistance Services

Language

**Language:**

Page 340, after line 10, insert:

"PPPP. The Department of Medical Assistance Services, in cooperation with the Department of Behavioral Health and Developmental Services, shall submit a request to the Centers for Medicare and Medicaid Services to amend its 1915(c) Home & Community-Based Services (HCBS) waivers to allow telehealth and virtual and/or distance learning as a permanent service option and accommodation for individuals on the Community Living, Family and Individual Services and Building Independence Waivers. The amendment, at a minimum, shall include those services authorized for telehealth and virtual options during the COVID-19 pandemic. The departments shall actively work with the established Developmental Disability Waiver Advisory Committee and other appropriate stakeholders in the development of the amendment including service elements and rate methodologies. The department shall have the authority to implement these changes prior to the completion of the regulatory process."



*Committee Approved Amendments to House Bill 30, as Introduced*

**Explanation:**

(This amendment extends the provision of Medicaid telehealth and virtual and/or distance learning for individuals on the Medicaid Developmental Disability Waiver programs permanently. These services were implemented during the pandemic through Medicaid Appendix K waivers and approved by the federal government.)

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Item 304 #7h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Medical Assistance Services	\$1,718,823	\$1,747,506	GF
	\$4,066,196	\$4,153,214	NGF

**Language:**

Page 313, line 47, strike "\$18,732,988,737" and insert "\$18,738,773,756".  
Page 313, line 47, strike "\$19,820,607,534" and insert "\$19,826,508,254".

**Explanation:**

(This amendment adds funding for the fiscal impact of House Bill 680 which directs the Department of Medical Assistance Services to update the State Plan for Medical Assistance to include a provision for the payment of Medicaid targeted case management services for individuals with severe traumatic brain injury. It is the intent of the General Assembly that in the enrolling of this act, funding included in this item shall be allocated among appropriate items within the Department of Medical Assistance Services.)

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Item 304 #8h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Medical Assistance Services	\$25,000,000	\$25,000,000	GF
	\$25,493,921	\$25,658,561	NGF

**Language:**

Page 313, line 47, strike "\$18,732,988,737" and insert "\$18,783,482,658".  
Page 313, line 47, strike "\$19,820,607,534" and insert "\$19,871,266,095".  
Page 335, line 57 after "members." strike the remainder of the line.  
Page 335, strike line 58.  
Page 335, line 59 strike "facility." and insert:  
"This funding shall be administered as a Medicaid rate add-on in the same manner as in paragraph 1. above."

*Committee Approved Amendments to House Bill 30, as Introduced*

**Explanation:**

(This amendment adds \$25.0 million from the general fund each year and \$25.4 million the first year and \$25.7 million the second year from federal Medicaid matching funds for Medicaid's Value-based Purchasing (VBP) program for nursing homes. This amendment also adds language to specify that the non-metric portion of the VBP program funding be provided as a Medicaid payment add-on to the rate instead of a lump sum payment. Under the federally-required structure of a VBP program, paying the non-metric based portion under VBP would delay payment until December for the relevant non-metric based payments. This will create a significant cash flow issue for five months beginning July 1, 2022 when rates would fully revert to having no add-on despite significant ongoing expenses. By excluding the non-metric based amount from federal approval of the VBP program and instead paying that portion as a Medicaid payment add-on to the rate (like the current \$15 per day), the delay would be avoided. In addition to the cash flow issue due to the timing of the lump-sum approach, delaying the non-metric based portion until December is contrary to the purpose of the funding, which was intended to help facilities get ready (improve) to meet the metrics.)

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Item 304 #9h

**Health and Human Resources**

Department of Medical Assistance Services

Language

**Language:**

Page 340, after line 10, insert:

"PPPP. The Department of Medical Assistance Services shall seek approval from the Centers for Medicare & Medicaid Services (CMS) for a quality improvement program addressing nursing home capacity building with funding from the Civil Monetary Penalties Reinvestment Fund. Program design could be based on the results of the Virginia Gold Quality Improvement Program pilot project, to include peer mentoring, job-related and interpersonal skills training, and work-related benefits."

**Explanation:**

(This amendment adds language to require the Department of Medical Assistance Services to seek federal approval to design a quality improvement program for nursing home capacity building. Funding for the program will come from civil monetary penalties received from nursing homes that are can be used to reinvest in nursing facility improvement projects. This is a recommendation of the Joint Commission on Health Care.)

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Item 304 #10h

**Health and Human Resources**

**FY22-23**

**FY23-24**

**Committee Approved Amendments to House Bill 30, as Introduced**

Department of Medical Assistance Services	\$2,359,250	\$2,351,658	GF
	\$2,405,750	\$2,413,342	NGF

**Language:**

Page 313, line 47, strike "\$18,732,988,737" and insert "\$18,737,753,737".  
 Page 313, line 47, strike "\$19,820,607,534" and insert "\$19,825,372,534".

**Explanation:**

(This amendment adds \$2.4 million from the general fund and \$2.4 million from nongeneral funds each year for the purchase of customized wheelchairs for Medicaid members with disabilities. Customized wheelchairs will reduce other costly medical treatment for secondary medical issues resulting from the lack of appropriate medically necessary equipment. Funding is contingent upon final passage of House Bill 241. It is the intent of the General Assembly that in the enrolling of this act, funding included in this item shall be allocated among appropriate items within the Department of Medical Assistance Services.)

Item 304 #11h

**Health and Human Resources**

	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Medical Assistance Services	(\$378,046,214)	(\$39,347,075)	GF
	\$126,634,820	\$657,139,195	NGF

**Language:**

Page 313, line 47, strike "\$18,732,988,737" and insert "\$18,481,577,343".  
 Page 313, line 47, strike "\$19,820,607,534" and insert "\$20,438,399,654".

**Explanation:**

(This amendment reduces general fund support for the Medicaid Program by \$378.0 million in fiscal year 2023 as a result of advancing payments by one year, from fiscal year 2023 to fiscal year 2022, to take advantage of a more generous federal Medicaid match rate during the current fiscal year due to the public health emergency. The amendment also reflects a change in federal Medicaid matching funds, resulting in additional general fund savings of \$39.3 million the second year to the Commonwealth. A separate amendment to House Bill 29 appropriates additional general fund monies in fiscal year 2022 to fully fund current services. This amendment replaces general fund support for the program with enhanced federal funding, resulting in no change in services to Medicaid recipients. It is the intent of the General Assembly that in the enrolling of this act, funding included in this item shall be allocated among appropriate items within the Department of Medical Assistance Services.)

*Committee Approved Amendments to House Bill 30, as Introduced*

Item 304 #12h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>
Department of Medical Assistance Services	\$150,000	\$0 GF
	\$150,000	\$0 NGF

**Language:**

Page 313, line 47, strike "\$18,732,988,737" and insert "\$18,733,288,737".

**Explanation:**

(This amendment adds \$150,000 from the general fund and \$150,000 from matching federal Medicaid funding the first year to fund the fiscal impact of House Bill 1046, which directs the Department of Medical Assistance Services to study options for and develop a plan to implement a process that provides Medicaid recipients with payments that can be used to purchase over-the-counter medications and medical supplies. Currently, certain over-the-counter medications can be purchased more cheaply by a recipient than the amount charged to the Medicaid program.)

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Item 304 #13h

**Health and Human Resources**

Department of Medical Assistance Services

Language

**Language:**

Page 340, after line 10, insert:

“PPPP. If a residential program or facility receives Medicaid payments and has entered into a placement agreement with a local department of social services, the program or facility shall not discharge a child except as specified in the comprehensive individual plan of care. This plan shall be submitted to the Department of Medical Assistance Services and its residential service authorization contractor for review and approval prior to any discharge action.”

**Explanation:**

(This amendment adds language to clarify that Medicaid reimbursed residential facilities that have entered into a placement agreement with a local department of social services shall not discharge a child, except as provided in the comprehensive individual plan of care that is submitted to the Department of Medical Assistance Services and its residential service authorization contractor.)

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*Committee Approved Amendments to House Bill 30, as Introduced*

Item 304 #14h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Medical Assistance	\$2,574,545	\$2,574,545	GF
Services	\$3,303,412	\$3,303,412	NGF

**Language:**

Page 313, line 47, strike "\$18,732,988,737" and insert "\$18,738,866,694".

Page 313, line 47, strike "\$19,820,607,534" and insert "\$19,826,485,491".

Page 331, strike lines 45 through 53 and insert:

"VV. Effective July 1, 2022, the department shall amend the State Plan for Medical Assistance to establish a new direct and indirect care peer group for nursing facilities operating with at least 80 percent of the resident population having one or more of the following diagnoses: quadriplegia, traumatic brain injury, multiple sclerosis, paraplegia, or cerebral palsy. In addition, a qualifying facility must have at least 90 percent Medicaid utilization and a case mix index of 1.15 or higher in fiscal year 2014. The department shall utilize the data from the most recent rebasing to make this change effective for fiscal year 2023 and subsequent rate years until this change is incorporated into the next scheduled rebasing. This change shall not affect rates established in the most recent rebasing for facilities in any other direct and indirect care peer groups. The department shall have the authority to implement this reimbursement change prior to completion of any regulatory process in order to effect such change. To the extent federal approval requires alternative approaches to achieve the same general results, the department shall have the authority to follow the federal guidance effecting this change."

**Explanation:**

(This amendment adds \$2.6 million from the general fund and \$3.3 million from federal Medicaid matching funds each year and language to create a new peer group with criteria only met by The Virginia Home, a unique nursing facility that cares for individuals suffering from quadriplegia, traumatic brain injury, multiple sclerosis, paraplegia, or cerebral palsy, over 90% of whom are Medicaid recipients. The population it serves maintain higher acuity scores and require significantly more staffing to care for the residents. Because of the patient population, The Virginia Home must operate private rooms and have more equipment such as mechanical lifts, electric chairs, etc. for its residents. This would allow it to receive higher Medicaid reimbursement for its Medicaid population.)

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Item 304 #15h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Medical Assistance	\$36,599,000	\$0	GF
Services	\$55,033,920	\$0	NGF

**Language:**

*Committee Approved Amendments to House Bill 30, as Introduced*

Page 313, line 47, strike "\$18,732,988,737" and insert "\$18,824,621,657".

Page 340, after line 10, insert:

"PPPP. Effective July 1, 2022 through June 30, 2023, the Department of Medical Assistance Services shall temporarily increase the rates by 12.5 percent for home and community based services provided by community mental health providers. The department shall have the authority to implement these changes prior to completion of any regulatory process undertaken in order to effect such change."

**Explanation:**

(This amendment adds funding and language to extend the fiscal year 2022 temporary rate increase that was provided through Medicaid home and community based services to community mental health providers. This funding will extend that temporary rate increase for one more year through fiscal year 2023.)

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Item 304 #16h

**Health and Human Resources**

**FY22-23**

**FY23-24**

Department of Medical Assistance  
Services

\$37,947,100  
\$39,898,215

\$43,301,084 GF  
\$45,701,535 NGF

**Language:**

Page 313, line 47, strike "\$18,732,988,737" and insert "\$18,810,834,052".

Page 313, line 47, strike "\$19,820,607,534" and insert "\$19,909,610,153".

Page 339, strike lines 17 through 26 and insert:

"KKKK.1. Out of this appropriation, \$175,077,739 the first year and \$200,377,997 the second year from the general fund and \$181,322,791 the first year and \$20,696,958 the second year from matching federal Medicaid funds and other nongeneral funds shall be provided to increase Developmental Disability (DD) waiver rates set forth in the following paragraph.

2. Effective July 1, 2022, the Department of Medical Assistance Services shall have the authority to update the rates for DD waiver services using the most recent rebasing estimates, based on their review of the model assumptions as appropriate and consistent with efficiency, economy, quality and sufficiency of care and reported no later than June 15, 2022, pursuant to language in House Bill 29. Rates shall be increased according to Tiered payments contained in the rebasing model, where appropriate for the type of service provided. Rates shall be increased for Group Homes, Sponsored Residential, Supported Living, Independent Living Supports, In-home Supports, Community Engagement, Community Coaching, Therapeutic Consultation, Private Duty and Skilled Nursing, Group Day Support and Group Supported Employment. The department shall have the authority to implement these changes prior to completion of any regulatory process to effect such change."

*Committee Approved Amendments to House Bill 30, as Introduced*

**Explanation:**

(This amendment adds \$37.9 million the first year and \$43.5 million the second year from the general fund and \$39.9 million the first year and \$45.7 million the second year from matching federal Medicaid and other nongeneral funds to rebase the Medicaid rates for DD waiver services that were not included in the House Bill 30, as introduced, including services provided in Group Homes serving 5 to 12 persons, Group Day Support and Group Supported Employment. The amendment also adds language setting out the appropriation for the Developmental Disability (DD) waiver rebasing totaling \$375.5 million from the general fund (GF) and \$389.0 million from federal Medicaid matching funds and other nongeneral funds over the biennium. Language also provides the Department of Medical Assistance Services (DMAS) with the authority to update the rates based on recent rebasing estimates after a review of the model assumptions is conducted and reported, no later than June 15, 2022, pursuant to language in a companion amendment in House Bill 29, which directs this review by DMAS, in consultation with the Department of Behavioral Health and Developmental Services. Language further clarifies that the rates shall be reflective of Tiered payments contained in the rebasing model. It is the intent of the General Assembly that in the enrolling of this act, funding included in this item shall be allocated among appropriate items within the Department of Medical Assistance Services.)

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Item 304 #17h

**Health and Human Resources**

**FY22-23**

**FY23-24**

Department of Medical Assistance  
Services

\$4,039,123  
\$4,118,661

\$4,106,384 GF  
\$4,214,536 NGF

**Language:**

Page 313, line 47, strike "\$18,732,988,737" and insert "\$18,741,146,521".

Page 313, line 47, strike "\$19,820,607,534" and insert "\$19,828,928,454".

Page 338, line 1, after "BBBB." strike "1."

Page 338, line 5, strike "2.718." and the remainder of the line.

Page 338, line 6, strike "rebasing." and insert:

"the greater of 3.2962 or the most recent rebasing."

Page 338, strike line 8.

Page 338, line 9, strike "subject to." and insert:

"the hospital's Medicaid costs.

Page 338, strike lines 11 through 14.

**Explanation:**

(This amendment adds \$4.0 million the first year and \$4.1 million the second year from the general fund and \$4.1 million the first year and \$4.2 million the second year from federal matching Medicaid funds and language directing the Department of Medical Assistance

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Services to adjust the formula used to calculate indirect medical education (IME) reimbursement for managed care discharges at Children's Hospital of the King's Daughters (CHKD). This change would restore CHKD's case mix index (CMI) factor to the fiscal year 2019 level, which had been reduced unexpectedly in fiscal year 2020 without regard to other critical factors. The change is intended to stabilize CHKD's IME funding levels so the hospital is not subject to dramatic fluctuations in future Medicaid payments that occur with rebasing and changes in federal policy, and would be consistent with historic levels of state support.)

---

Item 308 #1h

**Health and Human Resources**

Department of Medical Assistance Services

Language

**Language:**

Page 348, strike lines 11 through 25.

**Explanation:**

(This amendment removes budget language related to a study on providing human donor milk for Medicaid recipients. Similar legislation failed to pass the House.)

---

Item 309 #1h

**Health and Human Resources**

**FY22-23**

**FY23-24**

Department of Behavioral Health and  
Developmental Services

(\$1,330,681)  
(\$433,560)  
15.00

(\$1,330,681) GF  
(\$433,560) NGF  
15.00 FTE

**Language:**

Page 348, line 35, strike "\$11,975,041" and insert "\$10,210,800".

Page 348, line 35, strike "\$11,975,041" and insert "\$10,210,800".

**Explanation:**

(This amendment defers action on providing \$1.3 million from the general fund and \$433,650 from the nongeneral fund each year for additional licensing staff related to Developmental Disability (DD) services, until a review of the licensing division in the Department of Behavioral Health and Developmental Services is complete. Funding for twenty-eight additional staff in the DD area were added to the department in fiscal year 2021, including eleven licensing staff, nine quality assurance and risk management staff, five human rights advocates, two behavioral analysts, and one individual and family services staff.)

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*Committee Approved Amendments to House Bill 30, as Introduced*

Item 311 #1h

**Health and Human Resources**

**FY22-23**

**FY23-24**

Department of Behavioral Health and  
Developmental Services

(\$1,000,000)

\$0 GF

**Language:**

Page 349, line 43, strike "\$129,085,840" and insert "\$128,085,840".

Page 354, strike lines 19 through 28.

**Explanation:**

(This amendment removes funding and budget language proposed in the introduced budget for a comprehensive study of the state and local behavioral health systems. The newly created Behavioral Health Commission with full-time staff will have the opportunity to assess behavioral health issues and make recommendations for the General Assembly's consideration during 2022.)

---

Item 311 #2h

**Health and Human Resources**

**FY22-23**

**FY23-24**

Department of Behavioral Health and  
Developmental Services

(\$1,012,286)

\$0 GF

**Language:**

Page 349, line 43, strike "\$129,085,840" and insert "\$128,073,554".

Page 353, line 48, strike "\$1,012,286 the first year and".

Page 353, line 50, strike "in each year".

Page 353, line 52, strike "in".

Page 353, line 53, strike "each year".

**Explanation:**

(This amendment delays funding for a statewide marijuana and cannabis use prevention campaign until fiscal year 2024.)

---

Item 312 #1h

**Health and Human Resources**

Department of Behavioral Health and Developmental Services

Language

**Language:**

Page 356, line 17, after "L.", insert "L.1."

*Committee Approved Amendments to House Bill 30, as Introduced*

Page 356, after line 24, insert:

"2. The Department of Behavioral Health and Developmental Services shall monitor credentialed recovery homes for regulatory compliance and consult with the Virginia Association of Recovery Residences to keep the agency's public website's list of credentialed recovery homes up to date."

**Explanation:**

(This amendment adds budget language requiring the Department to Behavioral Health and Developmental Services to monitor credentialed recovery homes for regulatory compliance and consult with the Virginia Association of Recovery Residences to keep the agency's public website's list of credentialed recovery homes up to date.)

---

	Item 312 #2h	
<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>
Department of Behavioral Health and Developmental Services	\$2,500,000	\$0 GF

**Language:**

Page 354, line 29, strike "\$76,272,531" and insert "\$78,772,531".

Page 357, after line 9, insert:

"Q. Out of this appropriation, \$2,500,000 the first year from the general fund shall be provided for one-time start-up costs for the Northwestern Crisis Response Center to provide crisis services for 23 hours per day, seven days per week to individuals with a mental illness."

**Explanation:**

(This amendment provides \$2.5 million the first year from the general fund for crisis response center services in northwest Virginia (Winchester). The CRS will be located at the Winchester Medical Center to provide a safe space necessary for oversight of patients having a mental health crisis while also keeping these patients out of the emergency department.)

---

	Item 312 #3h	
<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>
Department of Behavioral Health and Developmental Services	(\$1,000,000)	(\$1,000,000) GF

**Language:**

Page 354, line 30, strike "\$76,272,531" and insert "\$75,272,531".

Page 354, line 30, strike "\$80,881,947" and insert "\$79,881,947".

Page 356, line 17, strike "\$2,700,000" and "\$2,700,000" and insert:

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"\$1,700,000" and "\$1,700,000".

**Explanation:**

(This amendment reduces new funding contained in the introduced budget by \$1.0 million each year, providing an increase of \$1.2 million from the general fund each year for recovery residences.)

---

	Item 312 #4h	
<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>
Department of Behavioral Health and Developmental Services	(\$1,431,100)	(\$1,431,100) GF

**Language:**

Page 354, line 30, strike "\$76,272,531" and insert "\$74,841,431".  
Page 354, line 30, strike "\$80,881,947" and insert "\$79,450,847".  
Page 355, line 41, strike "\$8,316,588" and "\$8,316,588" and insert:  
"\$6,885,488" and "\$6,885,488".

**Explanation:**

(This amendment reduces general funds in the introduced budget by \$1.4 million each year for the Virginia Mental Health Access Program, increasing overall funding for the initiative to \$6.9 million annually. This represents a 26 percent increase in funding for this program over the fiscal year 2022 appropriation.)

---

	Item 312 #5h	
<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>
Department of Behavioral Health and Developmental Services	\$2,500,000	\$0 GF

**Language:**

Page 354, line 30, strike "\$76,272,531" and insert "\$78,772,531".  
Page 357, after line 9, insert:  
"Q. Out of this appropriation, \$2,500,000 the first year from the general fund shall be provided for one-time start-up costs to establish a crisis receiving center in Prince William County."

**Explanation:**

(This amendment provides \$2.5 million from the general fund in fiscal year 2023 only to establish a crisis receiving center (CRC) in Prince William County. CRCs provide a more

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comprehensive response than crisis assessment centers or crisis stabilization units, because they operate on a 23/7 basis to avert behavioral health crises thus decreasing the role of law enforcement and reducing overreliance on institutional care including state hospitals.)

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Item 312 #6h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>
Department of Behavioral Health and Developmental Services	\$2,000,000	\$0 GF

**Language:**

Page 354, line 30, strike "\$76,272,531" and insert "\$78,272,531".

Page 355, line 30, after "appropriation," insert:

"\$2,000,000 the first year and".

Page 355, line 34, strike "create" and insert:

"implement".

Page 355, line 36, strike "The plan".

Page 355, strike lines 37 through 40.

**Explanation:**

(This amendment adds \$2.0 million from the general fund the first year to implement a program of alternative custody for individuals subject to a temporary detention order (TDO), who are awaiting transport to an inpatient bed.)

---

Item 312 #7h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>
Department of Behavioral Health and Developmental Services	\$2,500,000	\$0 GF

**Language:**

Page 354, line 30, strike "\$76,272,531" and insert "\$78,772,531".

Page 357, after line 9, insert:

"Q. Out of this appropriation, \$2,500,000 the first year from the general fund shall be provided for one-time start-up costs to establish a crisis receiving center in southwest Virginia."

**Explanation:**

(This amendment provides \$2.5 million from the general fund the first year for start-up costs to establish a crisis receiving center (CRC) in southwest Virginia for people with serious mental illness. CRCs provide a more comprehensive response than crisis assessment centers or crisis stabilization units, because they operate on a 23/7 basis to avert behavioral health crises thus

*Committee Approved Amendments to House Bill 30, as Introduced*

decreasing the role of law enforcement and reducing overreliance on institutional care including state hospitals.)

---

Item 313 #1h

**Health and Human Resources**

Grants to Localities

Language

**Language:**

Page 360, line 45, strike "who are addicted to opioids".

**Explanation:**

(This amendment removes language that restricts the use of medication assisted treatment to individuals with substance use disorders who are addicted to opioids. This will make this treatment option open to all individuals with substance use disorders.)

---

Item 313 #2h

**Health and Human Resources**

Grants to Localities

Language

**Language:**

Page 361, line 18, strike "will be implemented at up to" and insert: "may also be used for emergency client assistance resources and will be implemented in at least".

**Explanation:**

(This amendment expands use of \$3,700,800 in general fund appropriation provided each year for discharge planning at jails for individuals with serious mental illness to also include emergency client assistance resources. As such, this amendment allows the funds to be used for either new staff positions or for emergency client assistance resources. Additionally, this amendment permits the use of funding in additional jails meeting the criteria for funding.)

---

Item 313 #3h

**Health and Human Resources**

Grants to Localities

**FY22-23**

**FY23-24**

(\$5,625,000)

(\$9,525,000) GF

**Language:**

Page 357, line 20, strike "\$611,269,088" and insert "\$605,644,088".

*Committee Approved Amendments to House Bill 30, as Introduced*

Page 357, line 20, strike "\$652,586,687" and insert "\$643,061,687".

Page 360, line 24, strike "\$42,788,710" and "\$50,588,710" and insert: "\$37,163,710" and "\$41,063,710".

**Explanation:**

(This amendment reduces proposed new funding for permanent supportive housing by one-half, resulting in general fund savings of \$5.6 million the first year and \$9.5 million the second year. This results in a net increase of \$5.6 million the first year and \$9.5 million the second year from the general fund for permanent supportive housing, which represents an increase of more than 16.5 percent over the fiscal year 2022 appropriation for these services.)

---

Item 313 #4h

**Health and Human Resources**

**FY22-23**

**FY23-24**

Grants to Localities

(\$22,245,501)  
\$22,245,501

\$0 GF  
\$0 NGF

**Language:**

Page 362, line 8, after "LL.1", insert:

"\$7,762,376 from American Rescue Plan Act funds the first year".

Page 362, line 8, strike "\$10,962,376" and insert "\$3,199,999".

Page 362, line 14, after "first year" insert "from American Rescue Plan Act funds".

Page 362, line 16, after "first year" insert "from American Rescue Plan Act funds".

Page 362, line 18, after "first year" insert "from American Rescue Plan Act funds".

Page 362, line 22, after "first year" insert "from American Rescue Plan Act funds".

**Explanation:**

(This amendment replaces general fund support for STEP-Virginia with American Rescue Plan Act (ARPA) funds the first year, resulting in general fund savings of \$22.2 million in fiscal year 2023. This change only affects the fund source for STEP-Virginia and has no impact on implementation of the program.)

---

Item 313 #5h

**Health and Human Resources**

**FY22-23**

**FY23-24**

Grants to Localities

\$3,100,000

\$0 GF

**Language:**

Page 357, line 20, strike "\$611,269,088" and insert "\$614,369,088".

**Committee Approved Amendments to House Bill 30, as Introduced**

Page 363, after line 6, insert:

"TT. Out of this appropriation, \$3,100,000 from the general fund the first year shall be provided to the City of Chesapeake for the development of a 20-bed acute, inpatient psychiatric unit at Chesapeake Regional Healthcare. The funding shall be contingent on an agreement to maintain the 20-bed unit for psychiatric admissions for at least 10 years from the date of operation of the unit. The Department of Behavioral Health and Developmental Services shall work with Chesapeake Regional Healthcare to include contract provisions which guarantee that 50 percent of the total bed days will be used to divert admissions from state behavioral health hospitals."

**Explanation:**

(This amendment provides \$3.1 million the first year from the general fund to match funding from the City of Chesapeake for the development a 20-bed acute, inpatient psychiatric unit at Chesapeake Regional Healthcare, the only locally owned hospital in the Commonwealth. Language is added to require the facility to maintain the 20-bed psychiatric unit for at least 10 years from the date of operation and to guarantee that 50 percent of of the total bed days shall be used to divert admissions from state behavioral health hospitals.)

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		Item 330 #1h	
<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department for Aging and Rehabilitative Services	\$850,000	\$850,000	GF

**Language:**

Page 367, line 31, strike "\$101,722,327" and insert "\$102,572,327".  
 Page 367, line 31, strike "\$101,722,327" and insert "\$102,572,327".  
 Page 368, line 42, strike "\$5,847,640" and "\$5,847,640" and insert:  
 "\$6,697,640" and "\$6,697,640".

**Explanation:**

(This amendment provides \$850,000 from the general fund each year to provide independent living services including independent living skills training, advocacy, information and referral, peer mentoring, and transition to people with significant disabilities. This funding represents a 14.5 percent increase for these services over the fiscal year 2022 appropriation. Transition services includes youth transition services, services to people trying to transition from nursing facilities and other institutions, and services to prevent institutionalization.)

---

		Item 340 #1h	
<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Social Services	(\$4,000,000)	(\$4,000,000)	GF

*Committee Approved Amendments to House Bill 30, as Introduced*

**Language:**

Page 374, line 40, strike "\$54,975,425" and insert "\$50,975,425".

Page 374, line 40, strike "\$54,975,425" and insert "\$50,975,425".

Page 376, strike lines 5 through 17.

Page 376, line 18, strike "J." and insert "I."

**Explanation:**

(This amendment removes funding for a new initiative creating a public benefit navigator pilot program in the Office of New Americans.)

---

Item 344 #1h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Social Services	(\$350,000)	(\$350,000)	GF

**Language:**

Page 380, line 21, strike "\$46,927,762" and insert "\$46,577,762".

Page 380, line 21, strike "\$46,927,762" and insert "\$46,577,762".

Page 381, line 19, strike "\$1,350,000" and "\$1,350,000" and insert: "\$1,000,000" and "\$1,000,000".

**Explanation:**

(This amendment reduces \$350,000 from the general fund each year from a proposed increase of \$1,350,000 annually that was included in House Bill 30, as introduced. The remaining \$1.0 million annually will be used to expand the program's services.)

---

Item 345 #1h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Social Services	\$98,038	\$66,783	GF

**Language:**

Page 381, line 22, strike "\$302,951,205" and insert "\$303,049,243".

Page 381, line 22, strike "\$311,135,997" and insert "\$311,202,780".

**Explanation:**

(This amendment provides \$98,038 the first year and \$66,783 the second year from general funds for the development of the iFoster Portal or an App with similar functionality to include Virginia and locality-specific resources available to individuals who are currently being served or have been served in the foster care system, as well as professionals serving the foster care



*Committee Approved Amendments to House Bill 30, as Introduced*

population. The portal is a free internet resource that includes education assistance and workforce development options, as well as independent living resources geared for young adults who have experienced foster care.)

---

Item 345 #2h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Social Services	\$66,521	\$66,575	GF

**Language:**

Page 381, line 22, strike "\$302,951,205" and insert "\$303,017,726".

Page 381, line 22, strike "\$311,135,997" and insert "\$311,202,572".

**Explanation:**

(This amendment adds \$66,521 the first year and \$66,575 the second year from the general fund for the administrative cost of providing short-term housing supports to youth between the ages of 18 and 21 pursuant to House Bill 349. A separate amendment to Item 114 provides funding from the Department of Housing and Community Development for housing support services.)

---

Item 345 #3h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Social Services	(\$899,020) \$899,020	(\$1,230,983) \$1,230,983	GF NGF

**Language:**

**Explanation:**

(This amendment reduces general fund spending for adoption assistance, foster care and the KinGAP programs and replaces it with an equal amount of federal funding due to changes in the federal medical assistance percentage (FMAP) beginning October 1, 2022 through fiscal year 2024.)

---

Item 347 #1h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Social Services	\$1,000,000	\$1,000,000	NGF

**Language:**

Page 384, line 19, strike "\$59,200,789" and insert "\$60,200,789".

Page 384, line 19, strike "\$59,200,789" and insert "\$60,200,789".

*Committee Approved Amendments to House Bill 30, as Introduced*

Page 384, line 48, strike "\$7,750,000" and "\$7,750,000" and insert: "\$8,750,000" and "\$8,750,000".

**Explanation:**

(This amendment adds \$1.0 million each year from the federal Temporary Assistance for Needy Families (TANF) block grant for support of Community Action Agencies, representing an increase of almost 13 percent over the fiscal year 2022 appropriation.)

---

	Item 347 #2h	
<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>
Department of Social Services	\$200,000	\$0 NGF

**Language:**

Page 384, line 19, strike "\$59,200,789" and insert "\$59,400,789".

Page 388, after line 40, insert:

"Z. Out of this appropriation, \$200,000 the first year from the Temporary Assistance to Needy Families block grant shall be provided to Good Shepherd Housing and Family Services for housing, emergency services, children's services, budgeting, counseling and other resources for low-income families."

**Explanation:**

(This amendment provides \$200,000 the first year from the Temporary Assistance to Needy Families block grant to support Good Shepherd Housing and Family Services, a non-profit organization serving Northern Virginia that provides housing, emergency services, children's services, budgeting counseling and other resources for low-income families.)

---

	Item 347 #3h	
<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>
Department of Social Services	\$500,000	\$500,000 GF

**Language:**

Page 384, line 19, strike "\$59,200,789" and insert "\$59,700,789".

Page 384, line 19, strike "\$59,200,789" and insert "\$59,700,789".

Page 385, line 28, after "G." insert: "1."

Page 385, after line 36: insert:

"2. Out of this appropriation, \$500,000 the first year and \$500,000 the second year from the general fund shall be provided to Northern Virginia Family Services to deploy a neighborhood-based, mobile service delivery and outreach program."

*Committee Approved Amendments to House Bill 30, as Introduced*

**Explanation:**

(This amendment provides \$500,000 from the general fund each year to Northern Virginia Family Services to deploy a neighborhood-based, mobile service delivery and outreach program. This replicable model will address the immediate and long-term recovery needs of those who have been disproportionately impacted by the COVID-19 crisis and leverage civic participation and community building. The funds will support a mobile service delivery and outreach van, a trauma-informed Community Outreach Team, helping community members by connecting them to tools and resources to improve financial well-being, and providing support through mini-grants and direct assistance.)

---

Item 347 #4h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Social Services	\$939,500	\$939,500	NGF

**Language:**

Page 384, line 18, strike "\$59,200,789" and insert "\$60,140,289".  
Page 384, line 18, strike "\$59,200,789" and insert "\$60,140,289".  
Page 385, line 38, strike "\$1,136,500" and "\$1,136,500" and insert:  
"\$2,076,000" and "\$2,076,000".

**Explanation:**

(This amendment adds \$939,500 from the federal Temporary Assistance to Needy Families block grant each year to provide additional support for the existing 27 child advocacy centers (CACs). Costs have risen 282 percent since 2006. Currently, CACs serve almost 6,000 children and families and cover 82 percent of the state.)

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Item 347 #5h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Social Services	(\$700,000)	(\$700,000)	NGF

**Language:**

Page 384, line 19, strike "\$59,200,789" and insert "\$58,500,789".  
Page 384, line 19, strike "\$59,200,789" and insert "\$58,500,789".  
Page 388, line 10, strike the first "1,200,000" and insert "500,000".  
Page 388, line 10, strike the second "1,200,000" and insert "500,000".

**Explanation:**

(This amendment reduces \$700,000 each year in federal Temporary Assistance to Needy

*Committee Approved Amendments to House Bill 30, as Introduced*

Families block grant funding for United Communities to better reflect expected expenditures by this organization.)

---

Item 347 #6h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Social Services	(\$150,000)	(\$150,000)	NGF

**Language:**

Page 384, line 19, strike "\$59,200,789" and insert "\$59,050,789".  
Page 384, line 19, strike "\$59,200,789" and insert "\$59,050,789".  
Page 388, line 25, strike the first "750,000" and insert "600,000".  
Page 388, line 25, strike the second "750,000" and insert "600,000".

**Explanation:**

(This amendment reduces \$150,000 each year in federal Temporary Assistance to Needy Families block grant funding for Cornerstones to better reflect expected expenditures by this organization.)

---

Item 347 #7h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Social Services	(\$250,000)	(\$250,000)	NGF

**Language:**

Page 384, line 19, strike "\$59,200,789" and insert "\$58,950,789".  
Page 384, line 19, strike "\$59,200,789" and insert "\$58,950,789".  
Page 387, line 48, strike the first "350,000" and insert "100,000".  
Page 387, line 48, strike the second "350,000" and insert "100,000".

**Explanation:**

(This amendment reduces \$250,000 each year in federal Temporary Assistance to Needy Families block grant funding for FACETS to better reflect expected expenditures by this organization.)

---

Item 350 #1h

<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department of Social Services	(\$2,621,038)	(\$8,469,600)	GF
	(\$12,313,962)	(\$23,495,400)	NGF

*Committee Approved Amendments to House Bill 30, as Introduced*

**Language:**

Page 390, line 8, strike "\$146,532,625" and insert "\$131,597,625".  
 Page 390, line 8, strike "\$163,562,625" and insert "\$131,597,625".  
 Page 391, strike lines 43 through 51.  
 Page 391, line 52, strike "K." and insert "I."

**Explanation:**

(This amendment removes funding and defers replacement of the Virginia Case Management System, which was developed and implemented in 2014.)

		Item 355 #1h	
<b>Health and Human Resources</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Department for the Blind and Vision Impaired	\$125,000	\$125,000	GF

**Language:**

Page 394, line 2, strike "\$1,200,674" and insert "\$1,325,674".  
 Page 394, line 2, strike "\$1,200,674" and insert "\$1,325,674".  
 Page 394, line 6, strike the first "141,163" and insert "266,163".  
 Page 394, line 6, strike the second "141,363" and insert "266,363".

**Explanation:**

(This amendment adds \$125,000 each year from the general fund to increase funding for radio reading services for the blind and vision impaired. Funding is provided for a contract with five regional providers of these services.)

		Item 485 #1h	
<b>Central Appropriations</b>	<b>FY22-23</b>	<b>FY23-24</b>	
Central Appropriations	\$0	(\$100,000,000)	GF

**Language:**

Page 505, line 6, strike "\$110,101,901" and insert "\$10,101,901".  
 Page 507, strike lines 17 through 21.

**Explanation:**

(This amendment eliminates \$100.0 million from the general fund the second year for unidentified behavioral health services based on a study included in the introduced budget. A companion amendment in Item 311 eliminates funding and language for the study. The newly

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created Behavioral Health Commission with full-time staff will have the opportunity to assess behavioral health issues and make recommendations for the General Assembly's consideration during 2022.)

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Item 486 #2h

**Central Appropriations**

**FY22-23**

**FY23-24**

Central Appropriations

\$13,000,000

\$0 NGF

**Language:**

Page 507, line 22, strike "\$744,761,272" and insert "\$757,761,272".

Page 510, after line 11, insert:

"10) \$13,000,000 in the first year to the Department of Health (601) for hospital trauma centers funded through the Trauma Center Fund established in § 18.2-270.01 of the Code of Virginia for increased pandemic-related costs experienced by emergency departments. Funding shall also be subject to criteria set out in item 299 of this act."

**Explanation:**

(This amendment provides a one-time allocation of \$13.0 million the first year from the American Rescue Plan Act for hospital trauma centers funded through the Trauma Center Fund established in § 18.2-270.01 of the Code of Virginia for pandemic-related costs experienced by emergency departments. Funding shall also be subject to criteria set out in a companion amendment in Item 299 which requires that the funding shall be distributed only to those hospitals in which the number of individuals subject to Temporary Detention Orders served by the hospital have increased since fiscal year 2014.)

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Item 486 #12h

**Central Appropriations**

**FY22-23**

**FY23-24**

Central Appropriations

\$250,000

\$0 NGF

**Language:**

Page 507, line 22, strike "\$744,761,272" and insert "\$745,011,272".

Page 509, after line 31, insert:

"3) \$250,000 the first year to the Department of Behavioral Health and Developmental Services (720) to establish a pilot program at Carilion Clinic to study, operationalize and determine barriers for Opioid Education and Naloxone Distribution (OEND) in the emergency department to high-risk opioid use disorder and opioid overdose patients who present in the emergency department. The pilot program will examine the following items: (i) OEND naloxone kit design to meet appropriate Virginia Board of Pharmacy and federal regulatory requirements for dispensing medications from a hospital; (ii) cost of such OEND kits, including the

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reimbursement for such kits; (iii) specific naloxone dispensation requirements including a naloxone encounter form; (iv) OEND kit storage in the ED; (v) education for pharmacy, ED physicians, nurses and other pertinent ED staff; (vi) education needs, including what is required internally to meet process goals and requirements, and required patient education components and documentation; (vi) the role of Peer Recovery Specialists in the OEND process in the ED; and (viii) outcomes to be assessed to evaluate the downstream effects of the OEND program regarding lives saved by direct dispensation after acute overdose. The department shall submit a report on the findings of the pilot including policy recommendations to the Chairs of the House Appropriations and Senate Finance and Appropriations Committees no later than September 1, 2023."

**Explanation:**

(This amendment provides \$250,000 the first year from American Rescue Plan Act funds in fiscal year 2023 only to be used to establish a pilot program at Carilion Clinic in Roanoke to study, operationalize and determine barriers for Opioid Education and Naloxone Distribution in the emergency department (ED) to high-risk opioid use disorder and opioid overdose patients who present in the ED. A report on the results of the pilot including policy recommendations is required no later than September 1, 2023.)

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Item 486 #13h

**Central Appropriations**

**FY22-23**

**FY23-24**

Central Appropriations

\$9,718,539

\$0 NGF

**Language:**

Page 507, line 22, strike "\$744,761,272" and insert "\$754,479,811".

Page 510, after line 11, insert:

"10) \$9,718,539 in the first year to the Department of Medical Assistance Services (602) to reimburse local government-owned nursing homes for unreimbursed expenses and lost revenue due to the impact of COVID-19."

**Explanation:**

(This technical amendment provides one-time funding of \$9.7 million the first year from federal ARPA funds to address unreimbursed costs for pandemic related expenses. Government-owned nursing homes were deemed ineligible to receive pandemic Paycheck Protection Program (PPP) loans available to many other private providers, which were forgiven if employment levels were maintained.)

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Item 486 #15h

**Central Appropriations**

**FY22-23**

**FY23-24**

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Central Appropriations \$9,873,427 \$7,832,376 NGF

**Language:**

Page 507, line 22, strike "\$744,761,272" and insert "\$754,634,699".

Page 507, line 22, strike "\$129,019,679" and insert "\$136,852,055".

Page 511, line 18, strike "\$439,674" and insert "\$2,203,642".

Page 511, after line 20, insert:

Epidemiology and Lab Capacity for Homeless Service Sites & Congregate Settings	Department of Health (601)	\$575,688	\$575,688
Epidemiology and Lab Capacity for Strengthening the Healthcare-Associated Infections and Antimicrobial Resistance Program	Department of Health (601)	\$3,270,588	\$3,270,588
Epidemiology and Lab Capacity for Nursing Home and Long-term Care Facility Strike Teams	Department of Health (601)	\$3,986,100	\$3,986,100
Epidemiology and Lab Capacity for Travelers Health	Department of Health (601)	\$277,083	

**Explanation:**

(This amendment adds \$9.9 million the first year and \$7.8 million the second year from nongeneral fund appropriations to the Department of Health for ongoing federal grants related to COVID-testing, monitoring, data collection, and support for entities serving vulnerable populations.)

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Item 493 #1h

**Independent Agencies**

State Corporation Commission

Language

**Language:**

Page 516, after line 20, insert:

"C. 1. The State Corporation Commission (Bureau of Insurance) shall study and analyze the Commonwealth's options for potential implementation in 2025 of a new Essential Health Benefit (EHB) benchmark plan for individual and small group health insurance coverage that comply with federal regulations 45 CFR 156.111 (State selection of EHB-benchmark plan for plan years beginning on or after January 1, 2020, and annual reporting of state-required



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benefits). The Bureau of Insurance shall report its findings to the Health Insurance Reform Commission, and the Chairs of the House Committee on Appropriations and Senate Committee on Finance and Appropriations by November 1, 2022.

2. Until the Commonwealth makes a determination to select a new Essential Health Benefit benchmark plan, no qualified health plan shall be required to provide any state-mandated health benefit that is not provided in the essential health benefits package."

**Explanation:**

(This amendment provides direction to the State Corporation Commission's Bureau of Insurance to analyze Essential Health Benefits (EHB) benchmark plan models for consideration when the Commonwealth begins operating its State Health Benefit Exchange. The SCC's Bureau of Insurance is required to report its findings to the Health Insurance Reform Commission, and the Chairs of the House Committee on Appropriations and Senate Committee on Finance and Appropriations by November 1, 2022 for their consideration. Language is also added to clarify that qualified health plans are not required to provide state-mandated health benefits that are not part of the current essential health benefits package until a determination is made about the composition of those benefits.)

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