Tomorrow I will be moving four amendments to Bill 23-0760, the “Fiscal Year 2021 Budget Support Act of 2020”. I will move amendments #1 to #3, en bloc, without objection, because they all involve interconnected statutory changes that are required to disburse Fiscal Year 2021 funds to implement the recommendations of the Mayor's Commission on Healthcare Systems Transformation.

Amendment #1

This subtitle allows the Executive to fund Recommendation #3 from the Committee on Discharge Planning and Transitions of Care of the Mayor's Commission on Healthcare Systems Transformation. This recommendation advised expanding the availability and support for medical respite facilities by reviewing and updating the regulatory requirements, which may create barriers to additional medical respite options. This recommendation was not funded in the Fiscal Year 2021 budget; however, this amendment permits the Department of Health Care Finance to utilize the Medicaid Reserve to implement this recommendation; provided that sufficient funds are still available within the Medicaid reserve.

This amendment has no fiscal impact because it does not require DHCF to issue a grant, but allows DHCF to utilize $150,000 to implement Recommendation #3 from the Committee on Discharge Planning and Transitions of Care if funds are available.

Amendment #2

In her Fiscal Year 2021 budget, Mayor Bowser funded Recommendation #1 from the Committee on Equitable Geographic Distribution of Acute, Urgent, and Specialty Care of the Mayor's Commission on Healthcare Systems Transformation with a one-time $1.5 million Local funds
enhancement to the Department of Health to provide increased loan repayment and incentives to recruit and retain primary care and designated specialty providers, as well as non-clinical staff, in Health Professional Shortage Areas (HPSAs) and Medically Underserved Areas (MUAs). This subtitle contains the conforming amendments to the "District of Columbia Health Professional Recruitment Program Amendment Act of 2005", which are needed to implement the recommendation of the Commission.

There is no fiscal impact to this subtitle. These are simply conforming change to the D.C. Code required to effectuate the Mayor's $1.5 million budget enhancement.

**Amendment #3**

In her Fiscal Year 2021 budget, Mayor Bowser funded Recommendation #5 from the Committee on Equitable Geographic Distribution of Acute, Urgent, and Specialty Care of the Mayor's Commission on Healthcare Systems Transformation with a one-time $250,000 Local funds enhancement to the Department of Health to pilot a city-wide model, with a focus on Wards 7 and 8, to better connect prenatal care to the labor and delivery options in other parts of the city—through peer support networks, co-management, access to maternal and fetal medicine specialty, improvement in health information exchange, and assistance with transportation.

Recommendation #3 from the Committee on Discharge Planning and Transitions of Care of the Mayor's Commission on Healthcare Systems Transformation recommended expanding the availability and support for medical respite facilities by reviewing and updating the regulatory requirements, which may create barriers to additional medical respite options. This recommendation was not funded in the Fiscal Year 2021 budget, however, this subtitle provides the Department of Health Care Finance with the required grant-making authority to implement this recommendation in the event that it is funded by DHCF through the Medicaid Reserve.

There is no fiscal impact to this subtitle. The first part of this amendment implements conforming changes to the D.C. Code required to effectuate the Mayor’s $250,000 budget enhancement for Recommendation #5 of the Committee on Equitable Geographic Distribution of Acute, Urgent, and Specialty Care.

The second part of this subtitle has no fiscal impact because it does not require DHCF to issue a grant, but provides grant-making authority up to $150,000 to implement Recommendation #3 from the Committee on Discharge Planning and Transitions of Care in the event that DHCF transfers available funds from the Medicaid Reserve.

**Amendment #4**

The fourth and final amendment will be moved separately from the first three. The Public School Health Services Amendment Act of 2017 was effective February 17, 2018 (D.C. Law 22-61; 65 DCR 127). Council Rule 736 states that a “law, or provision of a law, that will be applicable subject to inclusion in a budget and financial plan that remains unfunded for 2 fiscal years shall be subject to repeal in the Budget Support Act on the third fiscal year following its enactment.” In
the past consideration has been given if progress has been made in funding legislation and the time limit for repeal has tolled for those fiscal years during which a portion of funds to support the fiscal impact of the act were appropriated by Council.

In Fiscal Year 2019, the Council increased the Department of Health’s recurring Local Funds budget by $4,400,000 within the Community Health Administration to support components of the School Health Services Program, including but not limited to a legislative mandate that requires clinical nursing coverage of 40 hours per week for all public and public charter schools. As such, this legislation should be spared from repeal this year, and should be funded or consider for repeal during the Fiscal Year 2022 budget process.

This amendment has no fiscal impact because it merely removing the repeal of legislation passed “subject to appropriations.

Copies of the amendments are attached. If you have any questions about this legislation, please contact Eric Goulet, Committee Director, at egoulet@dccouncil.us or 202-705-0482.

cc: All Councilmembers
    Council Officers
IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

Councilmember Vincent C. Gray

Date: June 28, 2020

Offered By: Councilmember Vincent C. Gray

Title: Bill 23-0760, the Fiscal Year 2021 Budget Support Act of 2020, and Bill 23-0XXX, the Fiscal Year 2021 Budget Support Emergency Act of 2020

Version: ___ Introduced
___ Draft Committee Print
___ Committee Print
___ First Reading
___ Amended First Reading
___ Engrossed
___ Enrolled
__X ANS

Title V, Subtitle D, subsection (b), the Medicaid Re-establishment Amendment Act of 2020, is amended by amending the amendatory new section 8b(b)(4) as follows:

(a) Subparagraph (B)(iii) is amended by striking the phrase “tools; and” and inserting the word “tools;” in its place.

(b) Subparagraph (C) is amendment by striking the word “year.” and inserting the phrase “year; and” in its place.

(c) A subparagraph (D) is amended to read as follows:
“(D) Award a competitive grant in an amount not to exceed $150,000 to fund operating expenses associated with the provision of medical respite care services to individuals who are homeless.”.

**Rationale:**

This subtitle allows the Executive to fund Recommendation #3 from the Committee on Discharge Planning and Transitions of Care of the Mayor's Commission on Healthcare Systems Transformation. This recommendation advised expanding the availability and support for medical respite facilities by reviewing and updating the regulatory requirements, which may create barriers to additional medical respite options. This recommendation was not funded in the Fiscal Year 2021 budget; however, this amendment permits the Department of Health Care Finance to utilize the Medicaid Reserve to implement this recommendation; provided that sufficient funds are still available within the Medicaid reserve.

**Fiscal Impact:** This amendment has no fiscal impact because it does not require DHCF to issue a grant, but allows DHCF to utilize $150,000 to implement Recommendation #3 from the Committee on Discharge Planning and Transitions of Care if funds are available.