

# 2001 SPECIAL SESSION I

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## HOUSE BILL NO. 11

Offered April 30, 2001

*A BILL to amend and reenact Items 293.10, 299, 306, 315, 316, 318, 319, 321, 323, 329, 379, 380, 382, 386, and 525 of Chapter 1073 of the Acts of Assembly of 2000, and to amend Chapter 1073 of the Acts of Assembly of 2000 by adding an item numbered 541.10, to provide revenue and appropriate funds for health and human services.*

Patrons—Hamilton, Callahan and Griffith

Referred to Committee on Appropriations

**Be it enacted by the General Assembly of Virginia:**

**1. That Items 293.10, 299, 306, 315, 316, 318, 319, 321, 323, 329, 379, 380, 382, 386, and 525 of Chapter 1073 of the Acts of Assembly of 2000 be hereby amended and reenacted and that the cited chapter be further amended by adding Item 541.10 as follows:**

### OFFICE OF HEALTH AND HUMAN RESOURCES

293. Not set out.

### COMPREHENSIVE SERVICES FOR AT-RISK YOUTH AND FAMILIES (200)

293.10.	Protective Services (45300)	154,586,836	112,545,805
		171,586,836	155,767,880
	Financial Assistance for Child and Youth Services (45303)	154,586,836	112,545,805
		171,586,836	155,767,880
Fund Sources:	General	105,522,493	80,655,144
		122,522,493	123,655,144
	Federal Trust	49,064,343	31,890,661
			32,112,736

Authority: Title 2.1, Chapter 46, Code of Virginia.

A. Out of this appropriation, \$1,064,245 the first year *from the general fund* and \$1,064,245 the second year *from the general fund nongeneral funds* shall be paid into the trust fund on the books of the State Comptroller, designated as "Community Services Trust Fund for Youth and Families." The general fund balance in the Fund shall not revert to the general fund at the end of the fiscal year, but shall be reappropriated for expenditure in the succeeding fiscal year. *The nongeneral funds shall be transferred from the Department of Social Services.*

B. The Department of Education shall serve as fiscal agent to administer funds cited in paragraphs A and C. The Director of the Department of Planning and Budget shall have authority to transfer the amounts cited in each of these paragraphs to the Department of Education *and to transfer funds between fiscal years to reimburse localities for mandated expenditures in excess of projections.*

C.1.a. Out of this appropriation, \$74,407,005 from the general fund and \$48,064,343 from nongeneral funds the first year and ~~\$72,842,934~~ \$79,342,934 from the general fund and ~~\$30,890,661~~ \$30,048,491 from nongeneral funds the second year, shall be used for the state pool of funds, pursuant to § 2.1-757, Code of Virginia. This appropriation shall consist of a Medicaid pool allocation, and a non-Medicaid pool allocation.

b. The Medicaid state pool allocation shall consist of \$23,424,987 from the general fund and \$39,644,345 from nongeneral funds the first year *and \$12,806,543 from the general fund and \$21,628,493 from nongeneral funds the second year.* The Office of Comprehensive Services will transfer these funds to the Department of Medical Assistance Services as they are needed to pay Medicaid provider claims.

c.1) Revenue derived from local governments for the local match share of Medicaid provider payments, when collected by the Office of Comprehensive Services on behalf of the Department of Medical Assistance Services, shall be paid into a special fund on the books of the State Comptroller, designated as "Comprehensive Services Act Local Match Fund." Revenues in the Comprehensive Services Act Local Match Fund shall be transferred by the Office of Comprehensive Services to the Department of Medical Assistance Services, in the form of a general fund appropriation, as needed for reimbursement of the local match share of Medicaid provider claims.

2) Revenues in the Comprehensive Services Act Local Match Fund shall not revert to the general

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56 fund at the end of the fiscal year, but shall be reappropriated for expenditure in the succeeding fiscal  
57 year.

58 d. The non-Medicaid state pool allocation shall consist of \$50,982,018 from the general fund and  
59 \$8,419,998 in nongeneral funds the first year and ~~\$58,368,949~~ \$66,536,391 from the general fund and  
60 \$8,419,998 in nongeneral funds the second year. The nongeneral funds shall be transferred from the  
61 Department of Social Services.

62 e. The Office of Comprehensive Services, with the concurrence of the Department of Planning and  
63 Budget, shall have the authority to transfer the general fund allocation between the Medicaid and  
64 non-Medicaid state pools in the event that a shortage should exist in either of the funding pools at the  
65 end of the fiscal year.

66 f. The State Executive Council shall deny state pool funding to any locality not in compliance with  
67 federal and state requirements pertaining to the provision of special education and foster care services  
68 funded in accordance with § 2.1-757, Code of Virginia.

69 g. *The Commissioner of the Department of Social Services shall review all foster care prevention*  
70 *cases exceeding six months. The Commissioner may provide written approval for up to an additional*  
71 *ninety days of service at a time. Local governments shall establish procedures for collecting parental*  
72 *co-pays in all appropriate cases.*

73 2.a. Out of this appropriation, ~~\$28,289,845~~ \$45,289,845 from the general fund and \$1,000,000 from  
74 nongeneral funds the first year and ~~\$5,029,067~~ \$42,593,312 from the general fund and \$1,000,000 from  
75 nongeneral funds the second year shall be set aside to pay for the state share of supplemental requests  
76 from localities that have exceeded their state allocation for mandated services. The nongeneral funds  
77 shall be transferred from the Department of Social Services.

78 b. In each year, the director of the Office of Comprehensive Services for At-Risk Youth and Families  
79 may approve and obligate supplemental funding requests in excess of the amount in 2 a above, for  
80 mandated pool fund expenditures up to 10 percent of the total general fund appropriation authority in  
81 C1a in this Item.

82 c. Localities requesting funding from the set aside in paragraphs 2a and 2 b must demonstrate that  
83 their request is based upon an increase in the number of mandated children or that the treatment costs  
84 have increased due to the service needs of the children. Localities must also demonstrate they are in  
85 compliance with all the provisions of the Comprehensive Services Act, including uniform assessment,  
86 family assessment team reviews, and data collection.

87 3. Each locality receiving funds for activities under the Comprehensive Services Act (CSA) shall  
88 have a utilization management process, approved by the State Executive Council, covering all CSA  
89 services, and shall provide information as required by the Office of Comprehensive Services, to include,  
90 but not be limited to expenditures, number of youth served in specific CSA activities, length of stay for  
91 residents in core licensed residential facilities, and proportion of youth placed in treatment settings  
92 suggested by a uniform assessment instrument.

93 4. The Secretary of Health and Human Resources, in consultation with the Secretaries of Education  
94 and Public Safety, shall direct the actions for the Departments of Social Services, Education, Juvenile  
95 Justice, Medical Assistance Services, Health, and Mental Health, Mental Retardation and Substance  
96 Abuse Services, to implement, as part of ongoing information systems development and refinement,  
97 changes necessary for state and local agencies to fulfill CSA reporting needs.

98 5. The State Executive Council shall provide localities with technical assistance on ways to control  
99 costs and on opportunities for alternative funding sources beyond funds available through the state pool.

100 6. Out of this appropriation, \$50,000 from the general fund each year is provided for a combination  
101 of regional and statewide meetings for technical assistance to local community policy and management  
102 teams, family assessment and planning teams, and local fiscal agents. Training shall include, but not be  
103 limited to, cost containment measures, utilization management, use of alternate revenue sources, and  
104 administrative and fiscal issues. A state-supported institution of higher education, in cooperation with the  
105 Virginia Association of Counties, the Virginia Municipal League, and the State Executive Council, may  
106 assist in the provisions of this paragraph. Any funds unexpended for this purpose in the first year shall  
107 be reappropriated for the same use in the second year.

108 7. The State Executive Council shall work with the Department of Medical Assistance Services'  
109 existing preauthorization and utilization management contract with a qualified medical review  
110 organization, in order to provide utilization management of residential placements provided to youth  
111 under the Comprehensive Services Act who are not Medicaid eligible. A payment of \$175,000 each year  
112 from the general fund shall be transferred to the Department of Medical Assistance Services for such  
113 utilization management services. The Department of Medical Assistance Services, in cooperation with  
114 representatives of the Virginia Association of Counties, the Virginia Municipal League, and the State  
115 Executive Council, shall develop the criteria and guidelines to be followed by the utilization  
116 management provider. *The State Executive Council shall deny funding to any locality that fails to*  
117 *comply with the provisions of utilization management pursuant to § 2.1-746, Code of Virginia.*

8. Out of this appropriation, \$70,000 the first year and \$27,500 the second year from the general fund is provided for the Office of Comprehensive Services to contract for the development of a uniform Web-based system for CSA reporting requirements.

9. The State Executive Council shall implement a uniform assessment instrument consistent with the recommendations of the Joint Legislative Audit and Review Commission's findings from its review of the Comprehensive Services Act.

10. The Office of Comprehensive Services shall determine a mechanism for reporting children served by the program that will allow for data to be collected on the number of foster care children receiving only maintenance payments, and the amount paid for these children.

11. For purposes of defining cases involving only the payment of foster care maintenance, pursuant to § 2.1-755, Code of Virginia, the definition of foster care maintenance used by the Virginia Department of Social Services for federal Title IV-E shall be used.

*12. The State Executive Council shall develop policies and procedures to validate compliance for any locality that exceeds prior year expenditures by more than fifteen percent. These areas for review shall include, but not be limited to, utilization management practices, compliance with state and federal foster care and special education provisions, parental co-pays, child support collections, and the use of federal funds.*

D. The funding formula to carry out the provisions of the Comprehensive Services Act for At-Risk Youth and Families is as follows:

1. Allocations. The allocations for the Medicaid and non-Medicaid pools shall be the amounts specified in paragraphs C 1 b and C 1 d in this Item. These funds shall be distributed to each locality in each year of the biennium based on the greater of that locality's percentage of actual 1997 Comprehensive Services Act pool fund program expenditures to total 1997 pool fund program expenditures or the latest available three-year average of actual pool fund program expenditures as reported to the state fiscal agent.

2. Local Match. All localities are required to appropriate a local match for the base year funding consisting of the actual aggregate local match rate based on actual total 1997 program expenditures for the Comprehensive Services Act for At-Risk Youth and Families. This local match rate shall also apply to all reimbursements under this Item, including trust fund reimbursements under paragraph A in this Item as well as administrative reimbursements under paragraph D 3 in this Item. Revenue derived from local governments for the local match share of Medicaid provider payments, when collected by the Office of Comprehensive Services on behalf of the Department of Medical Assistance Services, shall be paid into a special fund on the books of the State Comptroller, designated as the "Comprehensive Services Act Local Match Fund." Revenues in the Comprehensive Services Act Local Match Fund shall be transferred by the Office of Comprehensive Services to the Department of Medical Assistance Services as needed for reimbursement of the local match share of Medicaid provider claims. Revenues in the Comprehensive Services Act Local Match Fund shall not revert to the general fund at the end of the fiscal year, but shall be reappropriated for expenditure in the succeeding fiscal year.

3. Local Administrative Costs. Out of this appropriation, an amount equal to two percent of the fiscal year 1994 pool fund allocations, not to exceed \$1,466,398 from the general fund each year, shall be allocated among all localities for administrative costs. Every locality shall be required to appropriate a local match based on the local match contribution in paragraph D 2 of this Item. Inclusive of the state allocation and local matching funds, every locality shall receive the larger of \$12,500 or an amount equal to two percent of the total pool allocation. No locality shall receive more than \$50,000, inclusive of the state allocation and local matching funds. Localities are encouraged to use administrative funding to hire a full-time or part-time local coordinator for the Comprehensive Services Act program. Localities may pool this administrative funding to hire regional coordinators.

4. Definition. For purposes of the funding formula in the Comprehensive Services Act for At-Risk Youth and Families, "locality" means city or county.

E. Any unexpended general fund balance in this Item on June 30 each year shall not revert to the general fund but shall be reappropriated for expenditure in the succeeding year.

F. The State Executive Council shall assist the joint legislative subcommittee and executive commission, which are reviewing the public system of care for mentally disabled persons, in studying the use of state-operated facilities by Community Policy and Management teams for the provision of services under the Comprehensive Services Act.

G. The Department of Planning and Budget, in conjunction with the Office of Comprehensive Services, shall examine the Comprehensive Services Act regarding expenditure growth, Medicaid utilization patterns, and use of Title IV-E. The Director, Department of Planning and Budget, shall submit a report to the Governor and the Chairmen of the House Appropriations and Senate Finance Committees no later than September 1, 2000, with the findings from the examination, including initial recommendations regarding the appropriate funding levels for the first and second year of the biennium.

179 As a part of the study, the Director shall examine whether the current forecasting and budgeting process  
180 for the program needs to be changed.

181	Total for Comprehensive Services		154,586,836	112,545,805
182	for At-Risk Youth and Families			
183			171,586,836	155,767,880
184	Fund Sources:	General	105,522,493	80,655,144
185			122,522,493	123,655,144
186		Federal Trust	49,064,343	31,890,661
187				32,112,736

188 294. through 298. Not set out.

### 189 Department of Health (601)

190	299.	Administrative and Support Services	12,853,452	10,067,300
191		(44900)		
192				13,060,300
193		General Management and Direction (44901)	3,249,956	3,257,724
194		Computer Services (44902)	4,588,123	1,790,372
195				4,783,372
196		Accounting and Budgeting Services (44903)	1,852,496	1,854,040
197		Personnel Services (44914)	1,758,179	1,759,678
198		Procurement and Distribution Services	1,404,698	1,405,486
199		(44918)		
200	Fund Sources:	General	11,691,879	8,905,385
201				11,898,385
202		Special	1,161,573	1,161,915

203 Authority: §§ 3.1-530.1 through 3.1-530.9, 3.1-562.1 through 3.1-562.10, 32.1-11.3 through  
204 32.1-11.4, 32.1-16 through 32.1-23, 35.1-1 through 35.1-7, and 35.1-9 through 35.1-28, Code of  
205 Virginia.

206 As a condition of this appropriation, the Virginia Department of Health shall submit written status  
207 reports to the Secretary of Health and Human Resources and the Directors of the Department of  
208 Planning and Budget and the Department of Technology Planning on the stabilization and development  
209 of its information technology systems, specifically the Virginia Information Systems Integrated On-line  
210 Network (VISION). These reports shall be submitted on a quarterly basis, commencing on July 1, 2000,  
211 and continuing until all VISION modules have been implemented.

212 300. through 305. Not set out.

213	306.	Special Health Improvement and	7,334,134	7,313,064
214		Demonstration Services (42000)		
215				7,113,064
216		Pilot and Demonstration Services (42001)	7,334,134	7,313,064
217				7,113,064
218	Fund Sources:	General	3,510,863	3,488,953
219				3,288,953
220		Special	1,627,657	1,628,421
221		Dedicated Special Revenue	1,319,126	1,319,126
222		Federal Trust	876,488	876,564

223 Authority: § 32.1-2, Code of Virginia.

224 A.1. Out of this appropriation, \$1,342,544 the first year and \$1,342,544 the second year is provided  
225 from the general fund, \$700,000 the first year and \$700,000 the second year from the federal Temporary  
226 Assistance for Needy Families (TANF) grant, and \$100,000 the first year and \$100,000 the second year  
227 from other nongeneral funds to the Comprehensive Health Investment Project of Virginia (CHIP of  
228 Virginia), subject to availability of foster care prevention funding being transferred from the Department  
229 of Social Services. The purpose of the program is to develop, expand, and operate a network of local  
230 public-private partnerships providing comprehensive care coordination, family support and preventive

231 medical and dental services to low-income, at-risk children. General fund appropriations from this Item  
232 for CHIP projects shall be used to pay for local services and shall not be used for administrative costs.  
233 CHIP of Virginia shall continue to pursue raising funds and in-kind contributions from local  
234 communities. It is the intent of the General Assembly that CHIP program increase their efforts to raise  
235 funds from local communities and other private or public sources with the goal of reducing the reliance  
236 on general fund appropriations in the future.

237 2. Out of the appropriation for CHIP of Virginia, \$58,068 in the first year and \$58,068 in the second  
238 year shall be used as matching funds to add three full-time equivalent public health nurse positions to  
239 expand services in the Roanoke Valley and Allegheny Highlands.

240 3. By September 30, 2000, and by September 30, 2001, CHIP of Virginia shall submit a report to  
241 the Chairmen of the House Appropriations and Senate Finance Committees on the operations of the  
242 local CHIP offices, the effectiveness of the activities provided through the local offices, the number of  
243 children and families served, services provided, program and administrative costs, and funding.

244 B. Out of this appropriation shall be provided \$37,500 the first year and \$37,500 the second year  
245 from the general fund for the Virginia Transplant Council's educational activities.

246 C. Out of this appropriation shall be provided \$125,000 the first year and \$125,000 the second year  
247 from the general fund for the Arlandria Health Center for Women and Children. The Health Center shall  
248 pursue raising funds and in-kind contributions from the local community.

249 D. Out of this appropriation shall be provided \$25,000 the first year and \$25,000 the second year  
250 from the general fund for the Louisa County Resource Council. The Council shall continue to pursue  
251 raising funds and in-kind contributions from the local community.

252 E. Out of this appropriation, \$20,000 the first year and \$20,000 the second year from the general  
253 fund shall be provided to the Olde Towne Medical Center.

254 F. Out of this appropriation shall be provided \$25,000 the first year and \$25,000 the second year  
255 from the general fund for Women's Health Virginia, a statewide initiative to promote and improve  
256 women's and girls' health in Virginia, for an annual conference and for health education, prevention and  
257 research activities. Women's health Virginia shall pursue raising funds and in-kind contributions from  
258 private and other public sources.

259 G. Out of this appropriation, \$275,000 the first year and \$275,000 the second year from the general  
260 fund shall be provided to the Virginia Primary Care Association for the purchase of pharmaceuticals and  
261 medically necessary pharmacy supplies, and to provide pharmacy services to low-income, uninsured  
262 patients of the Community and Migrant Health Centers throughout Virginia. The uninsured patients  
263 served with these funds shall have family incomes no greater than 200 percent of the federal poverty  
264 level. The amount allocated to each Community and Migrant Health Center shall be determined through  
265 an allocation methodology developed by the Virginia Primary Care Association. The allocation  
266 methodology shall ensure that funds are distributed such that the Community and Migrant Health  
267 Centers are able to serve the pharmacy needs of the greatest number of low-income, uninsured persons.  
268 The Virginia Primary Care Association shall establish accounting and reporting mechanisms to track the  
269 disbursement and expenditure of these funds. The Virginia Primary Care Association shall submit a final  
270 report regarding the disbursement and expenditure of these funds and the number of low-income,  
271 uninsured persons receiving pharmaceuticals to the Commissioner of Health, the Chairmen of the House  
272 Appropriations and Senate Finance Committees, and the Joint Commission on Health Care no later than  
273 August 1, 2000.

274 H. Out of this appropriation, \$976,000 the first year and \$1,084,000 the second year from the general  
275 fund shall be provided to the Virginia Association of Free Clinics for the purchase of pharmaceuticals  
276 and medically necessary pharmacy supplies, and to provide pharmacy services to low-income, uninsured  
277 patients of the Free Clinics throughout Virginia. The amount allocated to each Free Clinic shall be  
278 determined through an allocation methodology developed by the Virginia Association of Free Clinics.  
279 The allocation methodology shall ensure that funds are distributed such that the Free Clinics are able to  
280 serve the pharmacy needs of the greatest number of low-income, uninsured adults. The Virginia  
281 Association of Free Clinics shall establish accounting and reporting mechanisms to track the  
282 disbursement and expenditure of these funds. The Virginia Association of Free Clinics shall submit a  
283 final report regarding the disbursement and expenditure of these funds and the number of low-income,  
284 uninsured persons receiving pharmaceuticals to the Commissioner of Health, the Chairmen of the House  
285 Appropriations and Senate Finance Committees, and the Joint Commission on Health Care no later than  
286 August 1, 2000.

287 I. The Department of Health shall conduct a study of the cost-effectiveness and medical efficacy of  
288 its telemedicine projects located in Lancaster County, Lee County, and the City of Danville. The  
289 Department shall provide initial results of this study to the Chairmen of the Senate Finance Committee,  
290 the House Appropriations Committee, and the Joint Commission on Health Care prior to December 1,  
291 2000. The final report shall be submitted prior to October 1, 2001.

292 J. Out of this appropriation, \$40,000 the first year and \$35,000 the second year from the general  
 293 fund is provided to the Department of Health and the Virginia Transplant Council for development of a  
 294 Virginia Organ and Tissue Donor Registry, in cooperation with the Department of Motor Vehicles.

295 307. through 314. not set out.

296	Total for Department of Health	420,834,965	417,927,722
297			420,720,722
298	General Fund Positions	1,719.00	1,719.00
299	Nongeneral Fund Positions	1,971.00	1,971.00
300	Position Level	3,690.00	3,690.00
301	Fund Sources: General	146,048,965	143,062,225
302			145,855,225
303	Special	104,700,394	104,756,001
304	Dedicated Special Revenue	82,433,070	82,433,070
305	Federal Trust	87,652,536	87,676,426

### 306 Department of Health Professions (223)

307	315.	Regulation of Professions and Occupations	14,164,562	14,881,245
308		(56000)		
309				15,366,482
310		Technical Assistance to Regulatory Boards	14,164,562	14,881,245
311		(56044)		
312				15,366,482
313	Fund Sources:	General	40,000	40,000
314		Dedicated Special Revenue	14,124,562	14,841,245
315				15,326,482

316 Authority: Title 54.1, Chapter 25, Code of Virginia.

317 A. Costs for professional regulation may be met by fees paid by the respective professions.

318 B. Out of this appropriation, \$40,000 the first year and \$40,000 the second year from the general  
 319 fund is provided for the Board of Nursing to collect, store, and make available to interested parties  
 320 workforce data from registered nurses, licensed practical nurses and certified nurse aides.

321	Total for Department of	14,229,562	14,946,245
322	Health Professions		
323			15,431,482
324	Nongeneral Fund Positions	133.00	133.00
325	Position Level	133.00	133.00
326	Fund Sources: General	40,000	40,000
327	Special	65,000	65,000
328	Dedicated Special Revenue	14,124,562	14,841,245
329			15,326,482

### 330 Department of Medical Assistance Services (602)

331	316.	Administrative and Support Services (47900)	83,072,842	63,298,460
332			87,550,606	74,053,588
333		General Management and Direction (47901)	65,974,706	46,200,324
334			70,452,470	56,955,452
335		Computer Services (47902)	17,098,136	17,098,136
336	Fund Sources:	General	23,872,483	21,926,899
337			25,102,100	24,093,951
338		Special	50,000	50,000
339		Federal Trust	59,150,359	41,321,561
340			62,398,506	49,909,637

341 Authority: Title 32.1, Chapters 9 and 10, Code of Virginia; P.L. 89-87, as amended, Title XIX,  
 342 Social Security Act, Federal Code.

343 A. By November 15 of each year, the Department of Planning and Budget, in cooperation with the  
 344 Department of Medical Assistance Services, shall prepare and submit a forecast of Medicaid  
 345 expenditures, upon which the Governor's budget recommendations will be based, for the current and  
 346 subsequent two years to the Chairmen of the House Appropriations and Senate Finance Committees. The  
 347 forecast shall detail the number of new nursing home beds expected to be added each year and the

resulting impact on the Medicaid budget.

B.1. As a condition of this appropriation, the Department of Medical Assistance Services shall submit written status reports to the Secretary of Health and Human Resources and the Directors of the Department of Planning and Budget and the Department of Technology Planning on the development and implementation of its new Medicaid Management Information System. These reports shall be submitted on a quarterly basis, commencing on July 1, 2000, and continuing until the new system has received its certification from the Health Care Financing Administration.

2. *If implementation of the new Medicaid Management Information System is delayed in fiscal year 2002 to the point that it is unlikely to receive Health Care Financing Administration certification and the resulting retroactive adjustment in federal financial participation from fifty percent to seventy-five percent for claims processing prior to the conclusion of this biennium, the Department of Accounts shall provide an interest-free treasury loan to the Department of Medical Assistance Services to address any remaining costs associated with implementation and certification of the new system. Such loan shall be repaid in annual installments over a period of three years, commencing one year after federal certification. Repayments of this loan will be financed through savings generated by the efficiencies of the new system. However, prior to requesting a treasury loan, the Department of Medical Assistance Services shall explore other financing strategies during the implementation period of this project and, in consultation with the Department of Planning and Budget, shall select the most viable option for ensuring completion of this project.*

C. The Department of Medical Assistance Services and the Department of Planning and Budget, with the assistance of the Department of Mental Health, Mental Retardation and Substance Abuse Services, shall use the Medicaid expenditure forecast models to project expenditures for State Plan Option services, including community mental health rehabilitation services; targeted mental health and mental retardation case management; substance abuse treatment for pregnant and postpartum women; intensive in-home and therapeutic day treatment for children and adolescent services in the Early and Periodic Screening, Diagnosis, and Treatment Program; mental retardation home- and community-based waiver services; and any other new or expanded mental health, mental retardation and substance abuse services that are covered by the State Plan for Medical Assistance.

D. The Department of Medical Assistance Services, to the extent permissible under federal law, shall enter into an agreement with the Department of Mental Health, Mental Retardation and Substance Abuse Services to share Medicaid claims and expenditure data on all Medicaid-reimbursed mental health, mental retardation and substance abuse services, and any new or expanded mental health, mental retardation and substance abuse services that are covered by the State Plan for Medical Assistance. The information shall be used to increase the effective and efficient delivery of publicly funded mental health, mental retardation and substance abuse services.

E.1. *The Department of Medical Assistance Services (DMAS) shall develop and implement a written plan to include procedures for audits of providers of community mental health, mental retardation, and substance abuse services furnished under the State Medical Assistance Plan conducted directly or through a contract with any other entity. This plan shall include, but shall not be limited to, provisions to cover the following: clear and specific guidelines to providers through published manuals and memoranda pertaining to covered services and requirements for reimbursement; availability and provision of DMAS training for providers relating to covered services and requirements for reimbursement; a mechanism for providers to receive timely written answers to questions during service delivery or claims processing; a mechanism for informing providers before and during the audit process as to the type of documentation to be made available for purposes of the audit; to the extent allowable by federal law and regulations, the alternative use of reasonable civil penalties in instances of administrative technical compliance errors determined through the regulatory process; use of a claims-based random sample, where an extrapolation methodology may be required for the computation of overpayments due to the high volume of claims involved; procedures for recovery of reimbursements; and procedures for the consideration and implementation of reasonable written comments and concerns submitted by providers.*

2. *In the development and implementation of this plan, DMAS shall solicit and consider comments and suggestions from providers of community mental health, mental retardation, and substance abuse services furnished under the State Medical Assistance Plan. DMAS shall complete and submit this plan to the Chairmen of the Senate Finance and House Appropriations Committees, along with a summary of the written comments and suggestions from Medicaid providers, no later than November 15, 2001, and shall implement the plan on January 1 2002, or, if regulations are required to implement a change, as soon as feasible after regulations are promulgated.*

317. not set out.

407	318.	Virginia Children's Medical Security Insurance	65,256,915	66,019,086
408		Plan (44600)		
409			41,069,316	52,799,104
410		Virginia Children's Medical Security Plan	58,789,084	59,551,255
411		Payments (44602)		
412			32,961,295	46,331,273
413		Children's Medical Assistance Administration	6,467,831	6,467,831
414		(44603)		
415			8,108,021	
416	Fund Sources:	General	14,984,052	14,984,052
417			3,685,903	10,198,655
418		Dedicated Special Revenue	7,006,804	7,262,525
419			11,952,020	8,470,661
420		Federal Trust	43,266,059	43,772,509
421			25,431,393	34,129,788

422 Authority: Title 32.1, Chapter 13, Code of Virginia.

423 A. Pursuant to Chapter 679, Acts of Assembly of 1997, the State Corporation Commission shall  
 424 annually, on or before June 30, 1998, and each year thereafter, calculate the premium differential  
 425 between: (i) 0.75 percent of the direct gross subscriber fee income derived from eligible contracts and  
 426 (ii) the amount of license tax revenue generated pursuant to subdivision A 4 of § 58.1-2501 for the  
 427 immediately preceding taxable year and notify the Comptroller of the Commonwealth to transfer such  
 428 amounts to the Virginia Children's Medical Security Insurance Plan Trust Fund as established on the  
 429 books of the Comptroller.

430 B.1. As a condition of this appropriation, revenues from the Virginia Medical Security Insurance Plan  
 431 Trust Fund, shall be used to match federal funds for the State Children's Health Insurance Program.

432 2. As a condition of this appropriation, \$1,131,758 from dedicated special revenue and \$2,263,516  
 433 from federal funds the first year and \$1,131,758 from dedicated special revenue and \$2,263,516 from  
 434 federal funds the second year shall be transferred from this Item to Item 383 for local departments of  
 435 social services to administer the Virginia Children's Medical Security Insurance Plan.

436 ~~3. The Department of Medical Assistance Services shall reimburse the Department of Social Services~~  
 437 ~~for agreed upon costs incurred by the Department of Social Services and the local Department of Social~~  
 438 ~~Services in the operation of Virginia's Title XXI children's health program; originally named the~~  
 439 ~~Virginia Children's Medical Security Insurance Plan, it was renamed the Family Access to Medical~~  
 440 ~~Insurance Security Plan, effective upon approval by the Health Care Financing Administration, pursuant~~  
 441 ~~to Title 32.1, Chapter 13, Code of Virginia.~~

442 C. Every eligible child applying for health insurance as provided for in Title 32.1, Chapter 13, Code  
 443 of Virginia, shall be enrolled and served in the program. To the extent that appropriations in this item  
 444 are insufficient, the Director of the Department of Planning and Budget shall transfer general fund  
 445 appropriations from Item 319 into this item to be used as state match for federal Title XXI funds.

446 D. The Department of Medical Assistance Services shall enter into agreements with the Department  
 447 of Education and the Department of Health so that children receiving free or reduced-fee school lunches  
 448 or services through the Women, Infants, and Children (WIC) program can be identified for outreach and  
 449 have eligibility for Title XXI determined on an expedited and streamlined basis. A report on the  
 450 agreements shall be provided to the Chairmen of the Senate Finance and House Appropriations  
 451 Committees by July 1, 2001.

452 E. The Department of Medical Assistance Services shall monitor the implementation and impact of  
 453 FAMIS monthly premiums, including but not limited to, the effect of premiums on enrollment,  
 454 disenrollment, and re-enrollment, and the administrative costs of collecting and enforcing premium  
 455 payments. The Department shall make quarterly reports to the Chairmen of the Senate Finance and  
 456 House Appropriations Committees, and the Joint Commission on Health Care on the impact of premium  
 457 payments, after monthly premiums have been implemented.

458 F. As a condition of this appropriation, the Department of Medical Assistance Services shall amend  
 459 the Family Access to Medical Security Insurance Plan to (i) provide an exception to the waiting period  
 460 for individuals with previous health insurance coverage in cases in which the individual can document  
 461 that the cost of such health insurance exceeded ten percent of the family's countable monthly income  
 462 and (ii) include a provision allowing a child's application to be filed by a parent, legal guardian, or  
 463 any other adult caretaker relative who has exercised responsibility for the daily care and supervision of  
 464 such child for at least ninety consecutive days.

465	319.	Medical Assistance Services (Medicaid)	2,870,084,601	2,934,684,223
466		(45600)		
467			3,001,160,508	3,111,942,236



	Nonmandatory Mental Health and Mental Retardation Services (45607)	221,351,563	496,881,049
			223,093,639
	Nonmandatory Mental Health, Mental Retardation and Substance Abuse Community Based Services (45608)	<del>223,865,293</del>	<del>223,920,680</del>
		237,849,360	265,351,647
	Professional and Institutional Services (45609)	2,400,409,040	2,478,601,593
		2,514,853,716	2,587,371,758
	Mental Illness Services (45610)	<del>24,458,705</del>	<del>35,280,901</del>
		27,105,869	36,125,192
Fund Sources:	General	1,384,150,314	1,413,835,983
		1,446,704,681	1,505,537,049
	Dedicated Special Revenue	1,517,245	1,517,245
	Federal Trust	1,484,417,042	1,519,330,995
		1,552,938,582	1,604,887,942

Authority: Title 32.1, Chapters 9 and 10, Code of Virginia; P.L. 89-87, as amended, Title XIX, Social Security Act, Federal Code.

A. It is the intent of the General Assembly to develop and cause to be developed appropriate, fiscally responsible methods for addressing the issues related to the cost and funding of long-term care. It is the further intent of the General Assembly to promote home-based and community-based care for individuals who are determined to be in need of nursing facility care.

B.1. The Director of the Department of Medical Assistance Services shall seek the necessary waivers from the United States Department of Health and Human Services to authorize the Commonwealth to cover health care services and delivery systems, as may be permitted by Title XIX of the Social Security Act, which may provide less expensive alternatives to the State Plan for medical assistance.

2. The Director shall promulgate such regulations as may be necessary to implement those programs which may be permitted by Titles XIX and XXI of the Social Security Act, in conformance with all requirements of the Administrative Process Act.

C.1. The appropriation includes \$107,051,282 the first year from the general fund and \$114,300,281 from the federal trust fund and ~~\$95,266,282~~ \$107,966,282 the second year from the general fund and ~~\$101,614,767~~ \$115,127,357 from the federal trust fund for reimbursement to the institutions within the Department of Mental Health, Mental Retardation and Substance Abuse Services. The Department of Mental Health, Mental Retardation and Substance Abuse Services shall be reimbursed for the federal share of general salary scale adjustments approved by the General Assembly.

2. The appropriation includes the first year ~~\$65,307,167~~ \$80,710,095 from the general fund and ~~\$69,543,142~~ \$86,772,983 from the federal trust fund, and the second year ~~\$65,309,487~~ \$91,231,633 from the general fund and ~~\$69,596,209~~ \$97,095,948 from the federal trust fund for reimbursement to the Department of Mental Health, Mental Retardation and Substance Abuse Services for the Mental Retardation Waiver. The appropriation also includes the first year ~~\$43,083,253~~ \$33,909,511 from the general fund and ~~\$45,931,731~~ \$36,456,771 from the federal trust fund and the second year ~~\$43,083,253~~ \$37,307,033 from the general fund and ~~\$45,931,731~~ \$39,717,033 from the federal trust fund for reimbursement to the Department of Mental Health, Mental Retardation and Substance Abuse Services for the "State Plan Option" community mental health and mental retardation services.

D. Out of this appropriation, the Department of Medical Assistance Services shall provide coverage of intensive assisted living care to residents of licensed Adult Care Residences who are Auxiliary Grant recipients. Individuals entitled to benefits under this section are not entitled to benefits under Item 321.

E. Out of this appropriation, \$50,000 in special fund revenue is appropriated in each year of the biennium to the Department of Medical Assistance Services for the administration of the disbursement of civil money penalties levied against and collected from Medicaid nursing facilities for violations of rules identified during survey and certification as required by federal law and regulation. Based on the nature and seriousness of the deficiency, the Agency or the Health Care Financing Administration may impose a civil money penalty, consistent with the severity of the violations, for the number of days a facility is not in substantial compliance with the facility's Medicaid participation agreement. Civil money penalties collected by the Commonwealth must be applied to the protection of the health or property of residents of nursing facilities found to be deficient. Penalties collected are to be used for (1) the payment of costs incurred by the Commonwealth for relocating residents to other facilities; (2) payment of costs incurred by the Commonwealth related to operation of the facility pending correction of the deficiency or closure of the facility; and (3) reimbursement of residents for personal funds or property lost at a facility as a result of actions by the facility or individuals used by the facility to provide services to residents. These funds are to be administered in accordance with the revised federal regulations and law, 42 CFR 488.400 and the Social Security Act § 1919(h), for Enforcement of

531 Compliance for Long-Term Care Facilities with Deficiencies. Any special fund revenue received for this  
532 purpose, but unexpended at the end of the fiscal year, shall remain in the fund for use in accordance  
533 with this provision.

534 F. If any part, section, subsection, paragraph, clause, or phrase of this Item or the application thereof  
535 is declared by the United States Department of Health and Human Services or the Health Care  
536 Financing Administration to be in conflict with a federal law or regulation, such decisions shall not  
537 affect the validity of the remaining portions of this Item, which shall remain in force as if this Item had  
538 passed without the conflicting part, section, subsection, paragraph, clause, or phrase. Further, if the  
539 United States Department of Health and Human Services or the Health Care Financing Administration  
540 determines that the process for accomplishing the intent of a part, section, subsection, paragraph, clause,  
541 or phrase of this Item is out of compliance or in conflict with federal law and regulation and  
542 recommends another method of accomplishing the same intent, the Director of the Department of  
543 Medical Assistance Services, after consultation with the Attorney General, is authorized to pursue the  
544 alternative method.

545 G. Included in this appropriation is ~~\$43,403,000~~ \$45,295,860 from the general fund and ~~\$46,291,603~~  
546 ~~\$48,291,603~~ from nongeneral funds the first year and ~~\$41,403,000~~ \$45,295,860 from the general fund  
547 and ~~\$44,141,364~~ \$48,291,603 from nongeneral funds the second year for Medicaid payments for the  
548 University of Virginia Medical Center. In the event that additional funding is available through projected  
549 balances in the Department of Medical Assistance Services' budget, the cited amounts may be increased.

550 H. Included in this appropriation is ~~\$85,985,600~~ \$96,985,600 from the general fund and ~~\$90,950,400~~  
551 ~~\$102,650,400~~ from nongeneral funds the first year and ~~\$74,985,600~~ \$98,576,192 from the general fund  
552 and ~~\$79,950,400~~ \$105,050,400 from nongeneral funds the second year for Medicaid payments for the  
553 ~~Medical College of Virginia Hospitals Authority~~ *Virginia Commonwealth University Health System*  
554 *Authority*. In the event that additional funding is available through projected balances in the Department  
555 of Medical Assistance Services' budget, the cited amounts may be increased.

556 I. The Department of Medical Assistance Services shall amend its regulations, effective July 1, 1998,  
557 to eliminate language that explicitly adopts the requirements of the provisions of federal law that were  
558 § 1902(a)(13)(A) and (F) of Title XIX (42 U.S.C. § 1396a(a)(13)(A) and (F)), until they were repealed  
559 by § 4711(a) of the Balanced Budget Act of 1997.

560 J. The Department of Medical Assistance Services shall seek amendments to the MEDALLION and  
561 MEDALLION II waivers to allow the Department to modify the process by which Medicaid recipients  
562 are enrolled into managed care programs. The Department shall modify the requirement that all  
563 Medicaid recipients be allowed at least 45 days to select a managed care provider. Upon approval from  
564 the Health Care Financing Administration, the Department shall promulgate appropriate regulations  
565 pursuant to the Administrative Process Act, § 9-6.14:4.1 et seq., Code of Virginia, to revise the  
566 MEDALLION and MEDALLION II regulations to comply with waiver changes. The Department shall  
567 implement the necessary regulatory changes consistent with the federal approval of waiver changes.

568 K. The Department shall establish a program to more effectively manage those Medicaid recipients  
569 who receive the highest cost care. To implement the program, the Department shall establish uniform  
570 criteria for the program, including criteria for the high cost recipients, providers and reimbursement,  
571 service limits, assessment and authorization limits, utilization review, quality assessment, appeals and  
572 other such criteria as may be deemed necessary to define the program. The Department shall seek any  
573 necessary approval from the United States Health Care Financing Administration, and shall promulgate  
574 such regulations as may be deemed necessary to implement this program.

575 L. The Department of Medical Assistance Services and the Department of Health shall work with  
576 representatives of the dental community: to expand the availability and delivery of dental services to  
577 pediatric Medicaid recipients; to streamline the administrative processes; and to remove impediments to  
578 the efficient delivery of dental services and reimbursement thereof. The Department of Medical  
579 Assistance Services shall report its efforts to expand dental services to the Chairmen of the House  
580 Appropriations and Senate Finance Committees by December 15 each year.

581 M. The Department of Medical Assistance Services shall implement continued enhancements to the  
582 prospective drug utilization review (pro-DUR) program. The Department shall continue (i) the  
583 implementation of a disease state management program including physicians, pharmacists, and others  
584 deemed appropriate by the Department and (ii) the Pharmacy Liaison Committee. The Department shall  
585 continue to work with the Pharmacy Liaison Committee and the Prior Authorization Advisory  
586 Committee to implement the disease state management program and such other initiatives for the  
587 promotion of cost-effective services delivery as may be appropriate. The Department shall report on the  
588 Pharmacy Liaison Committee's activities to the Board of Medical Assistance Services and to the  
589 Chairmen of the House Appropriations and Senate Finance Committees no later than December 15 each  
590 year of the biennium.

591 N.1. As a condition of this appropriation, the Department shall promulgate regulations to implement  
592 Medicaid reimbursement for treatment foster care case management designed to serve children and youth

referred by local Comprehensive Services Act teams. The regulations shall address coverage limitations and utilization review.

2. As a condition of this appropriation, the Department shall promulgate regulations to amend the State Plan for Medical Assistance to expand coverage of inpatient psychiatric services under EPSDT to include services in residential treatment facilities. The regulations shall address coverage limitations and utilization review.

3. For purposes of determining eligibility for coverage of treatment foster care and residential treatment services for children, the Department shall allow referrals either by local family assessment and planning teams or a collaborative, multidisciplinary team approved by the State Executive Council, consistent with § 2.1-755, Code of Virginia.

4. The Department, in cooperation with the State Executive Council, shall provide initial and ongoing training to local Comprehensive Services Act teams on the procedures for use of Medicaid for residential treatment and treatment foster care services, including, but not limited to, procedures for determining eligibility, billing, reimbursement, and related reporting requirements. The Department shall include in this training information on the proper utilization of inpatient and outpatient mental health services as covered by the Medicaid State Plan. The Department shall report annually, by June 30, to the Chairmen of the House Appropriations and Senate Finance Committees on the results of the training program. The report shall include the number of local team representatives attending formal training programs offered by the Department; the number of technical assistance requests responded to by the Department; and the type and amounts of training materials made available to local teams.

O. Out of this appropriation, the Department of Medical Assistance Services shall provide reimbursement for adult day health care services at the rate of \$45 per day for providers in Northern Virginia and \$41 per day for providers in the rest of the state.

P. Prior to implementation, the Department of Medical Assistance Services shall report to the Joint Commission on Health Care's Long-Term Care Subcommittee on the status of a revised nursing facility payment system. The payment system shall continue to provide reimbursement for the Specialized Care Program as in effect on February 15, 1999, until such time as appropriate regulations become effective pursuant to the Administrative Process Act. The report shall also address other long-term care financing issues and strategies, including, but not limited to, the extent to which patient acuity is considered under the payment system, waivers, and initiatives for better serving dual eligible beneficiaries.

Q. The Department of Medical Assistance Services shall amend the Home and Community Based Waiver for the Elderly and Disabled to permit the sharing of personal care service hours required by recipients who reside in the same home. Community-based care shall be cost-effective if (i) the cost to Medicaid for the individual who receives community-based care is less than or equal to the average cost to Medicaid for the individuals who would otherwise receive institutional care or (ii) the aggregate cost to Medicaid for the individuals in the same home who share services is equal to or less than the average cost to Medicaid for all recipients in the same home who would otherwise receive institutional care.

R. In accordance with the provisions of § 32.1-325.1:1, Code of Virginia, payment for family planning services shall be contingent upon the approval of the 1115 waiver for extended family planning services by the Health Care Financing Administration. If federal approval for the waiver is granted, payment for these services shall begin no later than three months following the date of approval.

S.1. The Director of the Department of Medical Assistance Services shall convene a workgroup composed of representatives from the Department of Rehabilitative Services; the Department of Mental Health, Mental Retardation and Substance Abuse Services; the Community Services Boards; the Department of Social Services; the Centers for Independent Living; the Disability Services Boards; consumers; families; advocates and public and private providers to develop an Individual and Family Developmental Disabilities Support Waiver which offers flexible individual and family-driven control of services to meet their individualized needs.

2. The waiver proposal shall include a full array of appropriate services to meet the varied needs of persons with developmental disabilities, including persons with autism. In addition, the waiver proposal shall contain eligibility criteria for persons with developmental disabilities to be served, number of persons projected to be served, annual cost projections, types of services and supports offered, and service benefit limits.

T. Contingent upon approval by the Health Care Financing Administration to implement an Individual and Family Developmental Disabilities Support Waiver, the Department of Medical Assistance Services shall promulgate appropriate regulations pursuant to the Administrative Process Act (§ 9-6.14:4.1 et seq.) to implement the Individual and Family Developmental Disabilities Support Waiver effective July 1, 2000. The Department shall implement the necessary regulatory changes consistent with the federal approval of the new waiver.

U. The State Plan for Medical Assistance Services shall be amended pursuant to the Administrative Process Act (§ 9-6.14:1 et seq.), Code of Virginia, to add coverage of medical nutrition therapy services

effective July 1, 2000. In conjunction with coverage of medical nutrition services, the Department of Medical Assistance Services shall implement a program to preauthorize the use of such services where appropriate.

V. The Board of Medical Assistance Services is authorized to adopt emergency regulations to be effective on July 1, 2000, to implement a revised payment system for nursing facility capital costs.

W. It is the intent of the General Assembly that the medically needy income limits for the Medicaid program are adjusted annually to account for changes in the Consumer Price Index.

X. The State Board for Medical Assistance Services shall develop amendments to the State Plan for Medical Assistance and seek the Health Care Financing Administration's approval to increase the income limit for the medically needy by the annual percentage change in the Consumer Price Index, as allowed by federal law, to be effective July 1, 2001, and annually hereafter.

Y.1. The Department of Medical Assistance Services shall enter into an agreement with the Department of Mental Health, Mental Retardation and Substance Abuse Services by September 1, 2000, to allow for the administration of the following Medicaid-covered services: community mental health rehabilitation services; targeted mental health and mental retardation case management; substance abuse treatment for pregnant and postpartum women; intensive in-home and therapeutic day treatment services for children and adolescents in the Early and Periodic Screening, Diagnosis and Treatment Program; mental retardation home- and community-based waiver services; and any other new or expanded mental health, mental retardation and substance abuse services related to these services that are covered subsequently by the Medicaid program. The agreement shall also specify the Department of Mental Health, Mental Retardation and Substance Abuse Services' responsibility for participation in policy and regulatory development for the above-listed services as described in the report of the Joint Subcommittee Studying the Future Delivery of Publicly Funded Mental Health, Mental Retardation and Substance Abuse Services, subject to the Department of Medical Assistance Services' oversight and approval with respect to compliance with federal law. The Department of Medical Assistance Services shall be responsible for paying claims for the above-listed Medicaid-covered services.

2. The Department of Planning and Budget, in cooperation with the Department of Medical Assistance Services, shall include the above-listed services in its November 15 forecast of Medicaid expenditures, upon which the Governor's budget recommendations will be based, for the current and subsequent two years.

3. Community service boards and behavioral health authorities, to the extent allowable under federal law, shall continue to be the single point of entry into the services system for community mental health rehabilitation services; targeted mental health and mental retardation case management; substance abuse treatment for pregnant and postpartum women; intensive in-home and therapeutic day treatment services for children and adolescents in the Early and Periodic Screening, Diagnosis and Treatment Program; mental retardation waiver services; and any other new or expanded mental health, mental retardation and substance abuse services that are covered subsequently by the Medicaid program.

4. Upon finalization of the agreement by September 1, 2000, the Department shall submit a report to the Chairmen of the House Appropriations and Senate Finance Committees describing the agreement and how it will be implemented by both agencies. The report shall be submitted by September 30, 2000. *The Department of Medical Assistance Services shall amend its inter-agency agreement with the Department of Mental Health, Mental Retardation, and Substance Abuse Services (DMHMRSAS) to clearly identify DMHMRSAS as the operational administrator, to the maximum extent allowable under federal law and regulation, of the mental retardation home- and community-based waiver and of the following Medicaid services: community mental health rehabilitation services; targeted mental health and mental retardation case management; substance abuse treatment for pregnant and postpartum women; intensive in-home and therapeutic day treatment services for children and adolescents in the Early and Periodic Screening, Diagnosis and Treatment Program; and any other new or expanded mental health, mental retardation and substance abuse services related to these services that are subsequently covered by the Medicaid program. This agreement shall include or reflect applicable provisions in the following paragraphs.*

2. *DMHMRSAS, as the operational administrator, to the maximum extent allowable under federal law and regulation, shall be responsible for planning, daily management, and operational responsibility for the home- and community-based waiver for mental retardation services (mental retardation waiver) and for the services listed in paragraph Y.1. under the general oversight of DMAS. DMHMRSAS is charged with responsibilities that include developing policy, service definitions, provider qualifications and standards, and service-related recipient eligibility criteria; collecting data for the services listed above; and participating with DMAS in the internal drafting of applicable regulations and amendments to the State Plan for Medical Assistance Services. DMAS is charged with forecasting expenditures; processing claims; enrolling providers; conducting utilization review; promulgating policy, rules and regulations; and funding Medicaid match within the General Assembly's appropriation. DMAS, as the single state Medicaid agency for Virginia, shall support the policy and operational efforts of DMHMRSAS with the Health Care Financing Administration (HCFA).*

3. The Department of Planning and Budget, in cooperation with DMHMRSAS and DMAS, shall include the services listed in paragraph Y.1. in its November 15 forecast of Medicaid expenditures, upon which the Governor's budget recommendations will be based, for the current and subsequent biennia.

4. Community services boards and behavioral health authorities shall remain as the single point of entry for waiver services and have the sole responsibility for targeted case management, as permitted by federal law and regulation, and care coordination, consistent with Item 323, paragraph J, of this act. As the local managers of services, the community services boards and behavioral health authorities shall ensure local accountability for publicly funded services, continuity of care, census management and discharge planning with state facilities, the health and safety of consumers that they serve, consumer choice of services and providers, and whenever available, the involvement and participation of private providers. Services provided directly by community services boards, behavioral health authorities, and private providers shall be choices for consumers.

5. DMHMRSAS, as the operational administrator, with the involvement of DMAS, shall receive input from consumer and family groups, advocacy groups, community services boards, private providers, local government organizations, and other interested parties regarding the development of this agreement.

6. DMAS shall involve DMHMRSAS in planning for and developing the Requests for Proposals and contracts for Medallion II. DMHMRSAS shall work with DMAS to provide a method for consumers to explore and resolve complaints with DMAS regarding these services.

7. DMAS and DMHMRSAS, with the involvement of the stakeholders listed in paragraph ZZ.5., shall develop service definitions for flexible Medicaid-reimbursed services to facilitate the development of community services needed by consumers. These services shall include, but not be limited to, crisis stabilization, gero-psychiatric residential services, respite care, intensive outpatient services, in-home services, medication services, vocational services, programs of assertive community treatment, and consumer-run services. Medicaid-reimbursed services and service definitions shall be developed to the maximum extent allowable under federal law and regulation.

8. DMAS and DMHMRSAS shall submit the proposed agreement by August 1, 2001, to the Governor, the Chairmen of the House Appropriations and Senate Finance Committees, and the Chairman of the Joint Commission on Behavioral Health Care for review. DMAS and DMHMRSAS shall implement this agreement by October 1, 2001.

Z. The Department of Medical Assistance Services shall report on (i) its actions to facilitate and enroll low-income Medicare beneficiaries as Qualified Medicare Beneficiaries (QMBs), Specified Low-Income Medicare Beneficiaries (SLMBs), and Qualified Individuals (QIs) using data available from federal sources; (ii) the utilization of allowable federal agreements and federal data to increase the number of persons enrolled in these programs; (iii) the feasibility of simplifying administrative forms, processes and practices for QMB, SLMB, and QI enrollment; and (iv) its actions to achieve the U.S. Health Care Financing Administration's target of a four percent annual enrollment increase in the QMB and SLMB programs. The Department shall also include an analysis of the cost for establishing an agreement with the U.S. Health Care Financing Administration to extend the current three-month period for enrolling in Medicare Part A coverage through the QMB program. The Department shall report to the Chairmen of the House Appropriations and Senate Finance Committees and the Joint Commission on Health Care by September 15, 2000.

AA. The Department of Medical Assistance Services shall assess the feasibility and advisability of providing nursing facilities with approved special care units fixed per diem Medicaid payments, equal to the Medicaid reimbursements payments applicable to the care of individuals with traumatic brain injuries at such facilities, for the care of individuals with acquired brain injuries that result from noncongenital causes other than direct trauma, such as cerebrovascular accidents, brain tumors, prolonged seizure activity, anoxia and neurotoxicity. The Department shall report its findings and recommendations to the Chairmen of the House Appropriations and Senate Finance Committees by December 1, 2000.

BB. Effective July 1, 2000, the Department shall increase reimbursement rates for dental health services by 10 percent.

CC. The Department of Medical Assistance Services shall not require dentists who agree to participate in the delivery of Medicaid pediatric dental care services, or services provided to enrollees in the Children's Medical Security Insurance Plan (CMSIP) or any variation of CMSIP, to also deliver services to subscribers enrolled in commercial plans of the managed care vendor, unless the dentist is a willing participant in the commercial managed care plan.

DD. The Department of Medical Assistance Services, with cooperation from the Department of Mental Health, Mental Retardation, and Substance Abuse Services, the Department of Rehabilitative Services (DRS), and the DRS Employment Services Organization Advisory Committee, consumers, families, advocates, community services boards, and private for-profit and nonprofit community-based rehabilitation providers, shall study policy and administrative changes to the State Plan for Medical Assistance Services to support work-related activities for persons with mental and other developmental

777 disabilities. The Department shall report to the Chairmen of the House Appropriations and Senate  
778 Finance Committees by November 1, 2000, on the study results and recommended changes, including  
779 any specific federal barriers to reforming Virginia's Medicaid program to provide maximum support for  
780 persons with mental and other developmental disabilities in obtaining and retaining employment.

781 EE.1. Effective July 1, 2000, the Department of Medical Assistance Services (DMAS) shall make a  
782 one-time, lump sum payment of \$12,243,204 to eligible Virginia hospitals participating in the Medicaid  
783 program to mitigate the estimated impact of the re-based Diagnosis Related Groupings rates, effective  
784 July 1, 1998, on each individual hospital for services provided between July 1, 1998, through December  
785 31, 1999. The payment shall be made in two equal, semiannual amounts during fiscal year 2001. For  
786 purposes of distribution, each hospital's share of the total amount shall be determined as follows:

787 a. DMAS shall determine the total operating payments due each hospital for inpatient hospital  
788 services provided from January 1, 2000, through June 30, 2000, using hospital claims data from  
789 discharges in that period.

790 b. DMAS shall determine the total operating payments that would have been due each hospital for  
791 the same services, had the inpatient hospital rates and weights applicable in fiscal year 1998 been  
792 continued with inflation for fiscal years 1999 and 2000.

793 c. The difference between the two values calculated in (i) and (ii) above, summed across all  
794 hospitals, is the "statewide difference." Each hospital-specific difference divided by the statewide  
795 difference is the hospital-specific percent share of the statewide difference.

796 d. The hospital-specific percent share of the statewide difference, times the total funds provided by  
797 this appropriation, is the hospital-specific lump sum payment to be paid in two equal semiannual  
798 payments during fiscal year 2001.

799 2. The Department of Medical Assistance Services shall provide the data used, specific calculation,  
800 and mechanics of the payment adjustment to the Virginia Medicaid Hospital Policy Advisory Council.

801 FF. It is the intent of the General Assembly that the use of the new atypical medications to treat  
802 seriously mentally ill Medicaid recipients should be supported by the formularies used to reimburse  
803 claims under the Medicaid fee-for-service and managed care plans.

804 GG. The Department of Medical Assistance Services and the Department of Mental Health, Mental  
805 Retardation and Substance Abuse Services shall develop a plan for review of Medicaid managed care  
806 plans of new, atypical medications used by Medicaid recipients to ensure appropriate access to the most  
807 effective atypical medications available for treatment of seriously mentally ill Medicaid recipients, except  
808 where indicated for the safety of the patient. The plan and estimated costs shall be reported to the  
809 Chairmen of the Senate Finance and House Appropriations Committees by October 1, 2001.

810 HH. The State Board for Medical Assistance Services shall develop amendments to the State Plan for  
811 Medical Assistance, to provide coverage of substance abuse treatment services for children and adults  
812 including emergency services; evaluation and assessment; outpatient services, including intensive  
813 outpatient services; targeted case management; and day treatment. The State Board shall seek the Health  
814 Care Financing Administration's approval to implement the State Plan amendments.

815 II. The Department, in cooperation with the Joint Commission on Health Care, Virginia  
816 Commonwealth University's Medical College of Virginia, the University of Virginia Health Sciences  
817 Center, the Eastern Virginia Medical School, the Virginia Academy of Family Physicians, the Virginia  
818 Chapter of the American College of Obstetrics and Gynecology, and the Virginia Chapter of the  
819 American College of Nurse Midwives, shall study the feasibility of providing a general fund supplement  
820 for physician services provided through Medicaid fee-for-service and Medicaid managed care plans to  
821 encourage community physicians to supervise residents, medical students, and nurse-midwifery students  
822 while providing obstetrical services. The Department's study shall include an analysis of the type and  
823 amount of supplement that could be provided as well as an estimate of the fiscal impact. The  
824 Department shall report its findings and recommendations to the Chairmen of the Senate Finance and  
825 House Appropriations Committees and the Joint Commission on Health Care by October 1, 2000.

826 JJ. Effective July 1, 2001, the Department shall amend the State Plan for Medical Assistance to add  
827 the category of eligibility, as described in § 1902(m) of the Social Security Act (42 U.S.C. § 1396a (m)),  
828 for aged and disabled individuals with income levels up to 80 percent of the federal poverty line.

829 KK. The State Plan for Medical Assistance shall be amended to provide coverage for heart, lung, and  
830 liver transplants for individuals 21 years of age or older.

831 LL. The Department shall report on the status of its telemedicine pilot projects and recommend any  
832 changes regarding Medicaid coverage and reimbursement of telemedicine services. The Department shall  
833 submit its report to the Governor and the Chairmen of the Senate Finance and House Appropriations  
834 Committees and the Joint Commission on Health Care by September 15, 2000.

835 MM.1. As a condition of this appropriation, effective July 1, 2000, the Department of Medical  
836 Assistance Services shall increase the reimbursement rates in the current nursing facility operating  
837 payment system to (i) restore funding for the negative impact of the case mix adjustment resulting from  
838 the Patient Intensity Rating System; (ii) reduce the occupancy standard to 90 percent for indirect and

plant costs and remove the standard entirely from determination of direct care rates; (iii) adjust the direct care cost ceilings to 112 percent of the peer group median and subsequently every two years consistent with the following paragraph 3; and (iv) eliminate the direct care incentive payment. In addition, the Department shall incorporate into direct care payments the amount of \$21,700,000, appropriated by the 1999 General Assembly, adjusted for inflation to fiscal year 2001. The amount shall be included by means of an equal per-day increase to both direct care ceilings and the direct care rate per day of each facility. The Department shall adopt regulations providing for the implementation of a new reimbursement system based on a Resource Utilization Groups (RUGS) methodology to reflect resident intensity. The amendments to the State Plan of Medical Assistance regarding the RUGS methodology shall become effective in 280 days or fewer of enactment of this Act. The Department shall submit a report to the Governor the Chairmen of the Senate Finance and House Appropriations Committees, and the Joint Commission on Health Care by November 1, 2000, on the implementation of the revised reimbursement rates and the status of the new reimbursement system.

2. Out of the amounts appropriated to nursing facilities, the Department may expend up to \$300,000 in fiscal year 2001 for costs associated with implementing the above provisions in paragraph 1.

3. The Department shall periodically recalculate the cost medians for both direct and indirect cost, not to exceed every two years. In the years when ceilings are not recalculated with new cost data, the previous year's ceilings will be adjusted for inflation.

NN. The Department shall consider findings of the Joint Legislative Audit and Review Commission and reevaluate Medicaid reimbursement rates paid to air medevac providers. The Department shall submit a report and recommended rates to the Governor and the Chairmen of the Senate Finance Committee, the House Appropriations Committee and the Joint Commission on Health Care by September 15, 2000.

*OO.1. Consistent with federal law changes contained in the 1997 Balanced Budget Act, requirements of the Health Care Financing Administration, and state industry standards, the Department of Medical Assistance Services is seeking federal approval of changes to its MEDALLION waiver and its Medallion II waiver.*

*2. In order to conform the state regulations to the federally approved changes and to implement the provisions of this act, the Department shall promulgate emergency regulations to become effective within 280 days or less from the enactment of this act. The Department shall implement these necessary regulatory changes to be consistent with federal approval of the waiver changes.*

*PP. The State Plan for Medical Assistance Services shall be amended pursuant to the Administrative Process Act, § 9-6.14:1 et seq. Code of Virginia, to place appropriate limits on coverage of prescription drugs in order to ensure fiscal efficiencies and sound therapeutic principles. The amendment may include, but not be limited to, impositions of limits on the supply of medication per prescription per patient per day. The Department of Medical Assistance Services shall promulgate emergency regulations to implement the amendment, to become effective within 280 days or less from the enactment of this act.*

*QQ. Contingent upon renewal of the Elderly and Disabled Waiver by the Health Care Financing Administration, the Department of Medical Assistance Services shall promulgate emergency regulations to become effective within 280 days or less from the enactment of this act. The Department shall implement these necessary regulatory changes to be consistent with federal approval of the waiver changes.*

*RR. The Department of Medical Assistance Services is hereby authorized to contract with a vendor to aid in determining differential claimable amounts for family planning services provided by Virginia's Medicaid program prior to 2000 as permitted by the Health Care Financing Administration. The Department shall deposit the refunds resulting from this effort into a nonrevertible, nongeneral fund established on the books of the State Comptroller, designated as the Family Planning Services Recoveries Fund. Payments shall be made from the Fund to the vendor for its contracted services.*

*SS.1. The Department of Medical Assistance Services (DMAS) shall enter into an inter-agency agreement with the Department of Mental Health, Mental Retardation, and Substance Abuse Services (DMHMRSAS). DMAS provides DMHMRSAS with the planning, daily management, and operational responsibility for implementing and managing the home- and community-based waiver for mental retardation services (MR waiver). The agreement shall establish DMHMRSAS as operational administrator, to the maximum extent allowable under federal law and regulation of this waiver, charged with responsibilities that shall include, but not be limited to, (i) developing policy, service definitions, provider requirements, service-related recipient eligibility criteria, and preauthorization of service plans, and (ii) participating with DMAS in the internal drafting of applicable regulations and State Plan amendments. DMHMRSAS shall request and manage the funds for start-up costs for services not otherwise covered by Medicaid MR waiver reimbursement. The agreement shall charge DMAS with the responsibilities of forecasting expenditures for the MR waiver, requesting appropriations to meet the forecast, processing claims, enrolling providers, conducting utilization review, and promulgating rules*



900 and regulations. DMAS, as the single state Medicaid agency for Virginia, shall support the operational  
901 efforts of DMHMRSAS with the Health Care Financing Administration (HCFA).

902 2. Any revisions to the current MR waiver or any new MR waiver application submitted to HCFA  
903 after January 1, 2001, shall specify that the MR waiver shall be operated by DMHMRSAS and that  
904 DMAS, in conjunction with DMHMRSAS, shall establish criteria for a waiting list that meets HCFA  
905 criteria and requirements, but accommodates and reflects regional variations in Virginia's diverse  
906 service delivery system to the greatest extent possible. Community services boards and behavioral health  
907 authorities shall manage the waiting list at the local level using these criteria in order to facilitate  
908 planning with other providers for service needs of consumers. Community services boards and  
909 behavioral health authorities shall remain the single point of entry for waiver services and have the sole  
910 responsibility for targeted case management and care coordination, consistent with Item 323, paragraph  
911 J, of this act. As the local managers of services, community services boards and behavioral health  
912 authorities shall ensure local accountability for publicly funded services, continuity of care, census  
913 management and discharge planning with state facilities, the health and safety of consumers that they  
914 serve, consumer choice of services and providers, and whenever available, the involvement and  
915 participation of private providers. Services provided directly by community services boards, behavioral  
916 health authorities and private providers shall be choices for consumers.

917 3. In preparing the revised home- and community-based waiver application for mental retardation  
918 services, consideration shall be given to the key values of the consumer and the family in their choice of  
919 services and providers; providing flexibility to best meet the needs of the consumer; protecting the  
920 health, safety and well being of the consumer; and providing supports that are self-directed whenever  
921 possible.

922 4. DMAS and DMHMRSAS shall review the draft HCFA report on the current waiver. Throughout  
923 the waiver revision or development process, DMAS and DMHMRSAS shall work with the Mental  
924 Retardation Waiver Task Force and provide the opportunity for participation by consumers, families,  
925 advocates, and other interested parties.

926 5. Thirty days before submission to HCFA, the home- and community-based waiver application,  
927 along with an implementation plan, shall be submitted to the Governor, the Chairmen of the House  
928 Appropriations and Senate Finance Committees, and the Chairman of the Joint Behavioral Health Care  
929 Commission no later than September 15, 2001. The implementation plan shall include rate-setting  
930 methodologies, strategies for provider development, development of mechanisms with private providers  
931 to assure consumers have individualized choices of service providers, impact of major systems changes,  
932 and transition from the current waiver to the revised waiver. DMAS expenditure forecasts for the new  
933 waiver shall be included in this plan.

934 TT. The Department of Medical Assistance Services shall amend the State Plan for Medical  
935 Assistance Services to continue to reimburse outpatient hospital services using Medicare Principles of  
936 Cost Reimbursement that were in effect as of June 30, 2000. This amendment shall become effective  
937 within 280 days or less from the enactment of this act.

938 UU. The Department of Medical Assistance Services shall amend the State Plan for Medical  
939 Assistance Services to reimburse hospitals for Direct Graduate Medical Education on a prospective  
940 methodology. The amount to be reimbursed shall be determined on a per resident basis. This  
941 amendment shall become effective within 280 days or less from the enactment of this act.

942 VV. The Department of Medical Assistance Services shall amend the State Plan for Medical  
943 Assistance to increase local government owned nursing homes' reimbursement based on a transfer  
944 agreement and subsequent transfer of funds. This amendment shall become effective consistent with  
945 approval by the Health Care Financing Administration (HCFA) of the related State Plan amendment. At  
946 such time as HCFA approves the State Plan amendment, the Department shall have the authority to  
947 enact emergency regulations under § 9-6.14:4.1 (C)(5) of the Administrative Process Act, to effectuate  
948 this provision.

949 WW. Any recoveries of payments made to nursing facilities under Item 335 II of Chapter 935, 1999  
950 Appropriation Act, shall not revert to the general fund. These recoveries shall be retained by the  
951 Department of Medical Assistance Services for redistribution to nursing facilities in a manner consistent  
952 with state regulations governing the use of funds appropriated under the above Item.

953 XX. The Department of Medical Assistance Services, in cooperation with the Department of Social  
954 Services, shall track applications, enrollments, re-enrollments, denials, grounds for denials,  
955 redeterminations of eligibility, and delivery of services to children applying for or receiving Medicaid  
956 services. The database shall also track children moving between the Family Access to Medical Insurance  
957 Security and Medicaid programs. Cumulative reports of this information shall be available for public  
958 inspection and distribution at regularly scheduled intervals.

959 YY. The Department of Medical Assistance Services, in cooperation with the Department of Mental  
960 Health, Mental Retardation, and Substance Abuse Services, shall ensure that children from birth to age  
961 six, who currently receive case management services or meet service eligibility criteria, receive case



962 management services.

963 *ZZ. Effective July 1, 2001, the State Plan for Medical Assistance Services shall be amended to add*  
 964 *coverage of breast and cervical cancer treatment of women diagnosed through the Breast and Cervical*  
 965 *Cancer Early Detection Program (Every Woman's Life). The coverage shall be limited to the period of*  
 966 *treatment for breast and cervical cancer.*

967 320. Not set out.

968	321.	Continuing Income Assistance Services (46100)	1,583,027	1,612,952
969			3,221,024	3,201,785
970		Regular Assisted Living Payments for Residents of	1,583,027	1,612,952
971		Adult Homes (46105)		
972			3,221,024	3,201,785
973	Fund Sources:	General	1,583,027	1,612,952
974			3,221,024	3,201,785

975 Authority: Title 63.1, Chapter 9, Code of Virginia.

976 A. The Department of Medical Assistance Services is authorized to provide coverage of payments for  
 977 individuals receiving Auxiliary Grant or General Relief payments in licensed Adult Care Residences  
 978 when those individuals meet the criteria established by the Department of Medical Assistance Services  
 979 for such payments. Individuals entitled to assisted living benefits under this section are not entitled to  
 980 benefits under Item 319.

981 *B.1. The Department of Medical Assistance Services shall continue to reimburse for personal care*  
 982 *services for those individuals who were covered under its Intensive Assisted Living Waiver as of March*  
 983 *17, 2000. This service coverage will be provided with the general fund appropriation in the amount of*  
 984 *\$1,637,997 in fiscal year 2001 and \$1,588,833 in fiscal year 2002 included in the Continuing Income*  
 985 *Assistance Services Program.*

986 2. The Department shall not admit any new individuals to this service and upon the transferring out  
 987 or the expiration of the last covered individual, this service shall cease to be covered. To continue to  
 988 receive this service, the covered individuals must continue to meet the intensive assisted living criteria.  
 989 Individuals who no longer meet the intensive assisted living criteria and are transferred out of this  
 990 service shall lose eligibility for this service.

991 3. Individuals desiring to be admitted to this service shall not have the right to appeal the  
 992 non-availability of this service nor of the loss of any future general fund appropriation. The Department  
 993 shall promulgate revised regulations, pursuant to the appropriate requirements of the Administrative  
 994 Process Act, § 9-6.14.1, Code of Virginia, consistent with this funding change and program termination.

995 322. Not set out.

996	Total for Department		3,053,667,520	3,099,290,856
997	Medical Assistance Services			
998			3,166,671,589	3,275,672,848
999		General Fund Positions	140.92	140.92
1000			143.30	143.30
1001		Nongeneral Fund Positions	166.08	166.08
1002			168.70	168.70
1003		Position Level	307.00	307.00
1004			312.00	312.00
1005	Fund Sources:	General	1,449,460,011	1,477,236,021
1006			1,503,583,843	1,567,907,575
1007		Special	8,850,000	8,850,000
1008		Dedicated Special Revenue	8,524,049	8,779,770
1009			13,469,265	9,987,906
1010		Federal Trust	1,586,833,460	1,604,425,065
1011			1,640,768,481	1,688,927,367

# 1012 Department of Mental Health, Mental Retardation and Substance Abuse Services (720)

1013	323.	Administrative and Support Services	20,088,684	20,960,657
1014		(44900)		
1015				21,168,532
1016		General Management and Direction	8,106,334	8,137,993
1017		(44901)		
1018				8,345,868

1019		Computer Services (44902)	3,536,506	4,366,611
1020		Architectural and Engineering Services	691,989	691,989
1021		(44904)		
1022		Collection and Locator Services (44905)	5,425,192	5,435,401
1023		Personnel Services (44914)	2,328,663	2,328,663
1024	Fund Sources:	General	18,459,583	19,331,556
1025				19,539,431
1026		Special	1,104,901	1,104,901
1027		Federal Trust	524,200	524,200

1028 Authority: Title 37.1, Chapter 1, Articles 1, 2, and 10, Code of Virginia.

1029 A. The Commissioner of the Department of Mental Health, Mental Retardation and Substance Abuse  
 1030 Services shall, at the beginning of each fiscal year, establish the current capacity for each facility within  
 1031 the system. When a facility becomes full, the Commissioner or his designee shall give notice of the fact  
 1032 to all sheriffs.

1033 B. The Commissioner of Mental Health, Mental Retardation and Substance Abuse Services shall  
 1034 work in conjunction with community services boards to develop and implement a graduated plan for the  
 1035 discharge of eligible facility clients to the greatest extent possible, utilizing savings generated from  
 1036 statewide gains in system efficiencies.

1037 C. ~~Out of this appropriation shall be provided \$671,558 the first year and \$2,348,370 the second year~~  
 1038 ~~from the general fund for implementation of the Sexually Violent Predators Treatment Program.~~  
 1039 ~~Notwithstanding the provisions of § 37.1-70.10, Code of Virginia, the Department may contract with~~  
 1040 ~~private or local entities to house and provide treatment to persons involuntarily committed under the~~  
 1041 ~~provisions of §§ 37.1-70.1 through 37.1-70.19~~

1042 D. Notwithstanding § 4-5.12 of this act and paragraph C of § 2.1-512, Code of Virginia, the  
 1043 Department of Mental Health, Mental Retardation and Substance Abuse Services is hereby authorized to  
 1044 deposit the entire proceeds of the sales of surplus land at state-owned mental health and mental  
 1045 retardation facilities into a revolving trust fund. The trust fund may initially be used for expenses  
 1046 associated with restructuring such facilities. Remaining proceeds after such expenses shall be dedicated  
 1047 to continuing services for current patients as facility services are restructured. The trust fund will receive  
 1048 any base budget savings resulting from facility restructuring. Thereafter, the fund will be used to  
 1049 enhance services to individuals with mental illness, mental retardation and substance abuse problems.

1050 E. Out of this appropriation shall be provided \$250,000 the first year and \$250,000 the second year  
 1051 from the general fund for the Consumer Support and Family Involvement Pilot Project.

1052 F. Out of this appropriation, \$2,570,847 the first year and \$2,570,847 the second year shall be  
 1053 provided from the general fund for a public-private partnership pilot to secure short-term inpatient  
 1054 psychiatric services through competitive contracts with community-based hospitals or other private health  
 1055 care providers, for purposes of serving individuals closer to their homes. Pursuant to individual  
 1056 agreements with the Department, community services boards will reduce their utilization at a selected  
 1057 state facility or facilities for short-term (30 days or less) acute hospitalization by a specified number of  
 1058 beds, and will contract by competitive bidding with community-based hospitals for short-term psychiatric  
 1059 inpatient services. Any savings resulting from the reduced utilization of short-term acute facility beds  
 1060 will be made available under agreement with the Department, to permit the community services boards  
 1061 to contract for additional short-term psychiatric inpatient services. Specific bed utilization targets and  
 1062 competitive contract performance expectations will be included in the performance contracts of these  
 1063 community services boards.

1064 G. Out of this appropriation, \$500,000 the first year and \$500,000 the second year shall be provided  
 1065 from the general fund for a program to maximize recruitment and retention of graduate medical students  
 1066 in psychiatry to serve in underserved areas.

1067 H. Out of this appropriation, \$130,986 the first year and \$130,986 the second year shall be provided  
 1068 from the general fund to establish 2.0 positions to enforce compliance by each state mental health and  
 1069 mental retardation facility with the provisions and requirements outlined in the facility directors'  
 1070 performance agreements with the Department. In addition to providing increased oversight of these  
 1071 performance agreements, these positions will monitor implementation of all settlement agreements with  
 1072 the United States Department of Justice.

1073 I. The agency shall transfer \$171,523 the first year and \$178,508 the second year from nongeneral  
 1074 funds to the Secretary of Health and Human Resources to support the activities of the Office of  
 1075 Inspector General.

1076 J. The Department of Mental Health, Mental Retardation, in cooperation with the Community  
 1077 Services Boards shall develop a plan to clarify the roles and responsibilities of Community Services  
 1078 Boards for the provision of care coordination, case management, and services to mentally disabled  
 1079 individuals, to increase consumer choice of providers and eliminate any perceived conflict of interest for  
 1080 Boards that provide case management and direct services. The Department shall report on its plan to the

Chairmen of the House Appropriations and Senate Finance Committees by December 15, 2000.

K. The Department of Mental Health, Mental Retardation, and Substance Abuse Services and the Department of Medical Assistance Services, in cooperation with the Office of Comprehensive Services, Community Services Boards, and Court Service Units, shall develop an integrated policy and plan, including the necessary legislation and budget amendments, to provide and improve access by children to mental health and mental retardation services. The plan shall identify the services needed by children, the cost and source of funding for the services, the strengths and weaknesses of the current service delivery system and administrative structure, and recommendations for improvement.

L. The Department of Mental Health, Mental Retardation, and Substance Abuse Services (DMHMRSAS) and the Department of Medical Assistance Services (DMAS), in cooperation with the Community Services Boards, shall select the specific substance abuse services that shall be available statewide to children and adults.

M. Prior to implementation of Medicaid coverage of substance abuse treatment services, DMHMRSAS and DMAS shall design a process for evaluating the costs and benefits, including cost offsets in other programs, of reimbursement by Medicaid and the Commonwealth's Children's Medical Security Insurance Plan of substance abuse treatment services on an annual basis. The Departments shall report the results of this evaluation by November 1, 2000, to the Governor and the General Assembly.

N. The Department shall evaluate the number, qualifications, competencies, and service of state facility and regional human rights advocates to ensure that each consumer in a state facility or community program has sufficient access, in terms of timeliness, geography, cultural competence, and community modalities, to a knowledgeable and skilled advocate. The Department shall ensure that these advocates are recruited, hired, trained, and supervised by the Office of Human Rights. The Department shall report on the results of this evaluation by December 15, 2000, to the Governor and General Assembly.

O.1. No facility operated by the Department of Mental Health, Mental Retardation, and Substance Abuse Services shall be sold, privatized, closed, or converted to any other use without the approval of the General Assembly.

2. The Department shall notify the Chairmen of the House Appropriations and Senate Finance Committees of any plans for privatization or contractual initiatives, other than that prohibited by paragraph O1 above, thirty days before implementation of such initiatives. Notification shall include a formal analysis which shall include, but not be limited to, the following components: (i) definition of activity and scope of work to be privatized; (ii) estimated amount and duration of the contract; (iii) number of employees impacted to include position title, grade, length of service and projected severance costs; (iv) options for retraining and/or alternate placements for displaced employees and potential retention rights with prospective contractors; (v) standards and outcome measures to assure maintenance of present levels of service and quality; (vi) comprehensive "make or buy" analysis, including all costs of present and proposed service and projected short-term and long-term savings; and (vii) options for application of contracts on a statewide basis or on a local option basis for facilities with unique geographical and/or service characteristics.

3. These provisions shall not apply to capital outlay services.

4. These provisions shall not extend authority to the Commissioner beyond that granted by the Code of Virginia.

5. No real property under the control of the Department of Mental Health, Mental Retardation, and Substance Abuse Services on behalf of the Commonwealth shall be sold or otherwise conveyed to another party or agency prior to June 30, 2002, without the express approval of the Governor and General Assembly. However, nothing herein shall be construed to prohibit the granting of easements to a locality or other political subdivision of the Commonwealth.

P. The Department, in cooperation with Virginia's community services boards and the Virginia Association of Community Services Boards, shall develop a proposal for implementing all outstanding, applicable recommendations made by the Joint Legislative Audit and Review Commission in its 1997 report, "Services for Mentally Disabled Residents of Adult Care Residences." The Department shall present the proposal to the Governor, the Chairmen of the House Appropriations and Senate Finance Committees, and the Joint Commission on Health Care prior to September 15, 2000.

Q. The Commissioner of Mental Health, Mental Retardation and Substance Abuse Services, or his designee, in cooperation with the directors of Central State Hospital, Southside Virginia Training Center, and Hiram Davis Hospital shall develop an agreement to provide fair and reasonable reimbursement for the use of local emergency medical services.

R.1. The Department of Mental Health, Mental Retardation and Substance Abuse Services shall monitor, on a quarterly basis, federal block grant funds, special project funds, and other items of a categorical nature allocated to community services boards (CSBs). Funds that have been properly allocated but not encumbered by the end of the second quarter shall be considered for reallocation to

community services boards that have a demonstrated need for additional one-time funding for the same purposes, unless a community services board can demonstrate sufficient reason to retain the funds.

2. Reallocations resulting from unencumbered funds of those items cited above shall be reported to the Chairmen of the House Appropriations and Senate Finance Committees no later than January 31 of each year.

3. The provisions in paragraphs 1 and 2 are not applicable to non-categorical CSB funds.

S. Out of this appropriation, \$35,000 the second year from the general fund shall be provided for a study of a center of geriatric excellence on the Eastern State Hospital campus in cooperation with the Virginia Commonwealth University Health System Authority, the University of Virginia School of Medicine, and the College of William and Mary. The Department shall contract with the appropriate departments and institutions for this study. A report on the study shall be provided to the Chairmen of the Senate Finance and House Appropriations Committees, and the Behavioral Health Care Commission by October 31, 2001.

T.1. The Commissioner shall establish a community implementation and transition team consisting of Department staff and representatives of the jurisdictions surrounding and encompassing any institution proposed for restructuring, including local governing officials, consumers, family members of consumers, advocates, facility employees, community services boards, public and private service providers, local health department staff, local social services staff, sheriffs' office staff, and other interested citizens. In addition, the members of the House of Delegates and the Senate of Virginia elected to serve the jurisdictions surrounding and encompassing the relevant institution shall serve on the community implementation and transition team for the relevant institution. Each community implementation and transition team shall advise the Commissioner on (i) the types, amounts, and locations of new and expanded community services needed to successfully implement the restructuring of the mental health system in Virginia; (ii) the development of a detailed implementation plan designed to build community mental health infrastructure; (iii) the creation of new and enhanced community services prior to the restructuring of the relevant institution, the reduction in beds of the relevant institution, the conversion of the use of the relevant institution, or any changes in the services of the relevant institution; (iv) the transition of institutionalized patients to community services; and (v) resolution of issues relating to the restructuring transition process, including employment issues.

2. At least nine months prior to a proposed restructuring, the community implementation and transition team shall submit a plan to the Joint Commission on Behavioral Health Care for review.

3. The Commissioner shall ensure that each restructuring plan includes the following components: (i) a plan for community education; (ii) state-of-the-art practice models, including such models for rural areas; (iii) a plan for assuring the availability of adequate professional treatment staff in the affected community; and (iv) an individual services plan for each patient being transferred or discharged as a result of the restructuring in compliance with § 37.1-197.1(A)(3), Code of Virginia.

4. The Joint Commission on Behavioral Health Care shall make recommendations to the Governor on the relevant plan no later than six months prior to the proposed restructuring date.

5. The Governor shall submit to the General Assembly such legislation and appropriations revisions as necessary to implement the plan.

6. If the necessary legislation and appropriations revisions are enacted, the Commissioner shall ensure that the plan components required by paragraph T.3. of this item are in place and may perform all tasks necessary to facilitate restructuring of the relevant facility.

324. through 328. not set out.

Total for Department of	63,634,670	64,510,534
Mental Health, Mental		
Retardation and Substance		
Abuse Services		
		64,718,409
General Fund Positions	311.07	320.07
Nongeneral Fund Positions	10.43	10.43
Position Level	321.50	330.50
Fund Sources:		
General	53,668,280	54,543,663
		54,751,538
Special	2,031,778	2,031,773
Federal Trust	7,934,617	7,935,098

#### Grants to Localities (790)

329.	Financial Assistance for Health Services (44500)	225,457,669	226,257,669
			223,667,005

1201		Substance Abuse Services (44501)	83,894,989	83,894,989
1202				83,971,125
1203		Local Administration Services (44503)	8,567,482	8,567,482
1204		Mental Health Services (44506)	91,374,413	92,174,413
1205				93,174,413
1206		Mental Retardation Services (44507)	41,620,785	41,620,785
1207				38,953,985
1208	Fund Sources:	General	165,878,222	166,678,222
1209				164,011,422
1210		Special	50,000	50,000
1211		Federal Trust	59,529,447	59,529,447
1212				59,605,583

1213 Authority: Title 37.1, Chapter 10, Code of Virginia.

1214 A. It is the intent of the General Assembly that community mental health, mental retardation and  
 1215 substance abuse services are to be improved throughout the state. Funds provided in this Item shall not  
 1216 be used to supplant the funding effort provided by localities for services existing as of June 30, 1996.

1217 B. Further, it is the intent of the General Assembly that funds appropriated for this Item may be used  
 1218 by Community Services Boards to purchase, develop, lease, or otherwise obtain, in accordance with  
 1219 § 37.1-197, Code of Virginia, real property necessary to the provision of residential services funded by  
 1220 this Item.

1221 C. Out of the appropriation for this Item, funds are provided to Community Services Boards in an  
 1222 amount sufficient to reimburse the Virginia Housing Development Authority for principal and interest  
 1223 payments on residential projects for the mentally disabled financed by the Housing Authority.

1224 D. The Department of Mental Health, Mental Retardation and Substance Abuse Services shall make  
 1225 payments to the Community Services Boards from this Item in twenty-four equal semimonthly  
 1226 installments, except for necessary budget revisions or the operational phase-in of new programs.

1227 E. Failure of a board to participate in Medicaid covered services and to meet all requirements for  
 1228 provider participation shall result in the termination of a like amount of state grant support.

1229 F. Community Services Boards may establish a line of credit loan for up to three months' operating  
 1230 expenses to assure adequate cash flow.

1231 G. Out of the appropriation for this Item, \$180,000 the first year and \$180,000 the second year from  
 1232 the general fund shall be provided to continue the Keeping Our Kids At Home program in the Roanoke  
 1233 Valley, to contract with community providers for short-term crisis hospitalization of children and  
 1234 adolescents.

1235 H. Out of the appropriation for this Item, the Department shall initiate statewide Programs of  
 1236 Assertive Community Treatment (PACT) to provide services to adults with serious mental illnesses in  
 1237 the community, in order to reduce hospitalizations.

1238 I. Out of the appropriation for this Item, \$750,000 the first year and \$750,000 the second year from  
 1239 the general fund shall be used to develop pilot projects in areas that have high concentrations of adult  
 1240 care residences. The Department of Mental Health, Mental Retardation and Substance Abuse Services, in  
 1241 cooperation with the Department of Social Services, shall design the projects to identify and provide the  
 1242 appropriate treatment and support for persons with mental illness, mental retardation, or substance abuse  
 1243 problems who reside in adult care residences. The Department shall ensure that the pilot projects are  
 1244 designed to provide a variety of service models, including the provision of services within the  
 1245 community and within the adult care residence. The Department shall evaluate the implementation of the  
 1246 pilot projects and measure project outcomes.

1247 J. Out of this appropriation ~~\$150,000~~ \$200,000 in the first year and ~~\$150,000~~ \$200,000 in the second  
 1248 year is provided to Grafton School for the continued operation and expansion of the Virginia Autism  
 1249 Resource Center.

1250 K. The Department of Mental Health, Mental Retardation and Substance Abuse Services shall  
 1251 conduct a study of methods to increase the number of service providers in Virginia's Part H early  
 1252 intervention system from underserved groups, including minority, low-income, and rural families. The  
 1253 Department shall consider a variety of recruitment and retention strategies including, but not limited to,  
 1254 the use of scholarship incentives, training opportunities, minority recruitment, and other strategies  
 1255 developed by the Task Force for Virginia's Part H early intervention system. In undertaking this study,  
 1256 the Department shall establish a task force comprised of representatives from underserved groups,  
 1257 colleges and universities, service agencies and providers, families, and the Joint Subcommittee Studying  
 1258 Early Intervention for Infants and Toddlers with Disabilities, to develop strategies for ongoing preservice  
 1259 and in-service training, recruitment, and retention of early intervention personnel from underserved  
 1260 groups.

1261 L. The Department of Mental Health, Mental Retardation, and Substance Abuse Services and the

**1262** Department of Rehabilitative Services shall assist the Cumberland Mountain Community Services Board  
**1263** in developing a management and funding plan for employment programs provided to disabled persons.

**1264** M. Out of this appropriation, \$500,000 the first year and \$500,000 the second year from nongeneral  
**1265** funds is provided to the Richmond Behavioral Health Authority to continue a substance abuse treatment  
**1266** program that allows substance-abusing women to remain with their children during treatment.

**1267** N. Out of this appropriation, \$76,136 the second year from nongeneral funds is provided to Blue  
**1268** Ridge Community Services to continue a public inebriate program that reduces the number of  
**1269** intoxication arrests and diverts nonviolent public inebriates from the local jail into substance abuse  
**1270** treatment.

<b>1271</b>	Total for Grants to Localities		225,457,669	<del>226,257,669</del>
<b>1272</b>				223,667,005
<b>1273</b>	Fund Sources:	General	165,878,222	<del>166,678,222</del>
<b>1274</b>				164,011,422
<b>1275</b>		Special	50,000	50,000
<b>1276</b>		Federal Trust	59,529,447	<del>59,529,447</del>
<b>1277</b>				59,605,583
<b>1278</b>		330. through 371. Not set out.		

<b>1279</b>	Grand Total for Department of		756,943,416	<del>759,247,503</del>
<b>1280</b>	Mental Health, Mental Retardation			
<b>1281</b>	and Substance Abuse Services			
<b>1282</b>				756,864,714
<b>1283</b>		General Fund Positions	6,821.18	6,830.18
<b>1284</b>		Nongeneral Fund Positions	3,233.32	3,233.32
<b>1285</b>		Position Level	10,054.50	10,063.50
<b>1286</b>	Fund Sources:	General	430,233,766	<del>432,290,936</del>
<b>1287</b>				429,832,011
<b>1288</b>		Special	258,741,636	258,988,072
<b>1289</b>		Federal Trust	67,968,014	<del>67,968,495</del>
<b>1290</b>				68,044,631

**1291** 372. through 378. not set out.

**1292** Department of Social Services (765)

<b>1293</b>	379.	Administrative and Support Services (47900)	<del>51,412,693</del>	<del>51,394,189</del>
<b>1294</b>			49,862,693	55,070,796
<b>1295</b>		General Management and Direction (47901)	3,406,905	3,408,576
<b>1296</b>		Computer Services (47902)	<del>35,694,507</del>	<del>35,673,793</del>
<b>1297</b>			34,144,507	39,350,400
<b>1298</b>		Accounting and Budgeting Services (47903)	2,681,281	2,683,333
<b>1299</b>		Personnel Services (47914)	1,651,515	1,652,775
<b>1300</b>		Planning and Evaluation Services (47916)	2,365,430	2,468,242
<b>1301</b>		Procurement and Distribution Services (47918)	2,647,259	2,662,225
<b>1302</b>		Financial and Operational Audits (47929)	2,715,464	2,594,831
<b>1303</b>		Administrative and Support Services for	250,332	250,414
<b>1304</b>		Individual and Family Economic Independence		
<b>1305</b>		Services (47930)		
<b>1306</b>	Fund Sources:	General	<del>19,486,661</del>	<del>19,482,484</del>
<b>1307</b>			17,936,661	23,159,091
<b>1308</b>		Special	2,892,484	2,892,484
<b>1309</b>		Federal Trust	29,033,548	29,019,221

**1310** Authority: Title 63.1, Chapter 1; § 9-6.14:1 et seq., Code of Virginia; P.L. 98-502, P.L. 104-156,  
**1311** P.L. 104-193, P.L. 104-327, P.L. 105-33, as amended; P.L. 105-89; P.L. 105-178, Federal Code; Titles  
**1312** IV-A, IV-B, IV-D, IV-E, XIX, XX, XXI of the federal Social Security Act, as amended.

**1313** A. The Commissioner of the Department of Social Services (DSS) and the Secretaries of  
**1314** Administration and Health and Human Resources shall develop an automated system for eligibility and  
**1315** service programs that include Temporary Assistance to Needy Families (TANF), Food Stamps, and  
**1316** Medicaid. The maximum use of federal funds for this purpose shall be explored.

**1317** B.1. To provide adequate oversight of the implementation of automated systems, and to ensure  
**1318** coordination with local social services agencies, the Department of Social Services shall maintain a  
**1319** Local Information Technology Planning Committee. The Committee shall include one representative

each from the Department of Technology Planning, the Department of Information Technology, the Department of Social Services, the Department of Medical Assistance Services, and the Joint Legislative Audit and Review Commission, and at least five local social services personnel to be selected by the Virginia League of Social Service Executives. The Committee shall provide advice to the Commissioner on all computer and telecommunications systems operated by the Department in support of programs administered by local social services agencies.

2. The Department shall retain the services of a qualified independent contractor with appropriate experience in information technology project management and systems integration to perform periodic audits of the performance of the ADAPT project. Such audits shall be conducted under the direction of the DSS Local Information Planning Committee and shall include, but not be limited to, the progress of the project in terms of: (a) planned versus actual work plan activities, (b) milestones and deliverables, (c) critical path activities, (d) execution of risk reduction activities, and (e) application of any contingency plans. The audit contractor shall report audit exceptions in a timely manner, note any areas of concern, and recommend remedial actions. At least semiannually, the audit contractor shall issue a written report including audit findings, recommendations, and the results to date of any follow-up actions by the Department. The contractor shall distribute such reports to the Commissioner of Social Services, the DSS Local Information Technology Planning Committee, the Governor, the Department of Planning and Budget, the ~~Council on Information Management~~ *Department of Technology Planning*, and the Chairmen of the Senate Finance and House Appropriations Committees.

3.a. The Department of Social Services shall own hardware and database management software purchased with funds appropriated to it. The Department of Information Technology may charge the Department of Social Services for operations and maintenance of such equipment and products but may not include any portion of the purchase price in the calculation of such charges. The Department of Information Technology may not use or sell the excess capacity resulting from these purchases, except pursuant to a Memorandum of Understanding (MOU) between the Departments of Planning and Budget, Information Technology, and Social Services. Any such MOU must provide for appropriate reimbursement to the general fund and any federal grant contributions for the purchases.

b. Recovery of the federal share of the cost of computer equipment in years following the Department's original purchase with general fund appropriation shall be deposited as revenue of the general fund in reimbursement for general fund expenditures made in prior years.

C. As a condition of the appropriation for this Item, pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, *as amended*, the Department shall, in cooperation with local departments of social services, maintain a waiver of the work requirement for Food Stamp recipients residing in areas that do not have a sufficient number of jobs to provide employment for such individuals, including those areas designated as labor surplus areas by the U.S. Department of Labor.

D. The Department, in consultation with welfare recipients and welfare advocates, shall prepare and distribute brochures, videos, and other community education materials to explain fully, concisely, and simply the rights and responsibilities of welfare applicants and recipients under the Virginia Independence Program and the Virginia Initiative for Employment not Welfare.

E. The Department shall implement an Electronic Benefits Transfer (EBT) system as required under Title Eight of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193. That federal statute mandates that all states distribute Food Stamp benefits by electronic means by October 1, 2002.

F. The Department of Social Services (DSS), in collaboration with the Office of Comprehensive Services, shall provide training to local staff serving on Family Assessment and Planning Teams and Community Policy and Management Teams. Training shall include, but need not be limited to, the federal and state requirements pertaining to the provision of the foster care services funded under § 2.1-757, Code of Virginia. The training shall also include written guidance concerning which services remain the financial responsibility of the local departments of social services. Training shall be provided on a regional basis at least once per year. Written guidance shall be provided to local Comprehensive Services Act teams by July 1, 2000, and updated whenever there is a change in allowable expenses under federal or DSS guidelines. In addition, the Department of Social Services shall provide ongoing local oversight of its federal and state requirements related to the provision of services funded under § 2.1-757, Code of Virginia.

G. The Department of Social Services, in cooperation with local departments of social services, shall promote the Children's Medical Security Insurance Plan or Family Access to Medical Insurance Security Plan in Southside Virginia localities and promptly enroll eligible children. The Department shall report to the Chairmen of the House Appropriations and Senate Finance Committees by July 1, 2000, on their progress in enrolling children in the program, and provide quarterly progress reports thereafter.

H. *On July 1 of each year in which funds are appropriated, the Department of Social Services shall*

1381 *begin payments to local organizations for purposes provided for in this act. If contracts are required in*  
 1382 *advance of payments, the contracts shall be completed in time to meet the July 1 deadline for beginning*  
 1383 *payments.*

1384 *1. To the extent permitted by federal law, the Department of Social Services shall permit local social*  
 1385 *services agencies to implement semiannual reporting for food stamp households with earned income as*  
 1386 *authorized by 65 Federal Register 70133-70212 (November 21, 2000, to be codified at 7 C.F.R.*  
 1387 *§273.12(a)(1)(vii) et al.).*

1388	380.	State Administration for Standards of Living	40,114,932	39,909,895
1389		Services (45100)		
1390			42,349,709	41,260,032
1391		Regional and Areawide Assistance	11,614,759	11,566,750
1392		Administration (45101)		
1393				11,386,159
1394		State Administration of Financial Assistance for	3,783,375	3,632,472
1395		Standards of Living Services (45102)		
1396			6,018,152	4,982,609
1397		State Administration of Social Services for	4,146,501	4,140,376
1398		Standards of Living (45103)		
1399		Community Services Block Grant (45104)	11,766,971	11,766,971
1400		Financial Assistance to Localities for Social	8,803,326	8,803,326
1401		Services (45105)		
1402	Fund Sources:	General	8,971,790	8,789,375
1403			11,206,567	10,139,512
1404		Special	723,006	723,006
1405		Federal Trust	30,420,136	30,397,514

1406 Authority: Title 2.1, Chapter 39; Title 63.1, Chapters 1 and 6, Code of Virginia; Title VI, Subtitle B,  
 1407 P.L. 97-35, as amended; P.L. 103-252, as amended; P.L. 104-193, as amended, Federal Code.

1408 A.1. All increased state or federal funds distributed to Community Action Agencies shall be  
 1409 distributed as follows:

1410 The funds shall be distributed to all local Community Action Agencies according to the Department  
 1411 of Social Services' funding formula (75 percent based on low-income population, 20 percent based on  
 1412 number of jurisdictions served, and five percent based on square mileage served), adjusted to ensure that  
 1413 no agency receives less than 1.5 percent of any increase.

1414 2. Out of this appropriation, \$250,000 the first year and \$250,000 the second year from the general  
 1415 fund shall be provided for expansion of community action services into the following previously  
 1416 unserved local jurisdictions: the City of Petersburg (to be served by the Richmond Community Action  
 1417 Program); the Counties of Nottoway, Lunenburg, and Charlotte (by the Central Piedmont Action  
 1418 Council); the County of Orange (by the Skyline Community Action Program); the County of Brunswick  
 1419 (by the Sussex-Surry-Greensville Improvement Association); the County of Campbell (by the Lynchburg  
 1420 Community Action Group); and the County of Lee (by the Rural Areas Development Association, Inc.).

1421 3. Out of this appropriation, \$750,000 the first year and \$750,000 the second year from the federal  
 1422 Temporary Assistance to Needy Families block grant shall be provided for Centers for Employment  
 1423 Training programs at Southeastern Tidewater Opportunity Program, Alexandria Office of Community  
 1424 Services, People Inc., Lynchburg Community Action Group, and Total Action Against Poverty.

1425 B. The Department shall continue to fund from this Item all Community Action Agencies funded in  
 1426 Item 463 of Chapter 853 of the 1995 Acts of Assembly.

1427 C. The toll-free telephone hotline operated by the Department of Social Services to receive child  
 1428 abuse and neglect complaints shall also be publicized and used by the Department to receive complaints  
 1429 of adult abuse and neglect.

1430 D. If it has not already done so, the Department of Social Services shall apply for all available  
 1431 federal Food Stamp waivers as soon as possible and in no case later than July 14, 2000. The  
 1432 Department shall provide appropriate documentation of such application to the Department of Planning  
 1433 and Budget (DPB) on or before July 14, 2000. If the Department of Social Services determines that any  
 1434 such waiver cannot contribute to improving the accuracy of Food Stamp eligibility and benefits  
 1435 determination and will clearly have a detrimental impact on the Commonwealth's Food Stamp program,  
 1436 it shall notify DPB in writing on or before July 10, 2000, and shall obtain DPB agreement not to apply  
 1437 for the waiver. The Department shall not terminate such waivers without advance approval from the  
 1438 Department of Planning and Budget.

1439 E. Out of the appropriation for State Administration of Financial Assistance for Standards of Living  
 1440 Services, ~~\$374,994~~ \$2,609,771 the first year and ~~\$222,222~~ \$1,572,359 the second year from the general  
 1441 fund is appropriated to meet the Food Stamp reinvestment requirement of the U.S. Department of



1442 Agriculture. These amounts are attributable to the error rate for federal fiscal year 1998 years through  
 1443 1999. Of the amount required in the second year, \$88,888 shall be assessed to local departments of  
 1444 social services on a basis proportional to caseload. This reduction is reflected in the appropriation in  
 1445 Item 383.

1446 F. The Department of Social Services is hereby authorized to expend amounts provided for in Item  
 1447 548 for grant payments and administrative costs of the Virginia Caregivers Grant Program operated  
 1448 pursuant to Chapter 21, Title 63.1, Code of Virginia.

1449 G. Out of this appropriation, \$250,000 the first year and \$250,000 the second year from the federal  
 1450 TANF grant shall be provided by the Department to support the expansion of services provided by food  
 1451 banks. The Department shall issue a Request for Proposals specifying that these funds shall be used only  
 1452 for the expansion of services and shall not to be used to supplant funds that support existing programs.

1453 381. Not set out.

1454	382.	Protective Services (45300)	75,134,131	62,969,871
1455			81,673,726	83,059,769
1456		Foster Care (45301)	64,099,720	52,142,506
1457			70,639,315	71,960,768
1458		Protection of Children and Youths (45302)	2,826,866	2,619,509
1459		Financial Assistance for Child and Youth Services	7,672,578	7,672,578
1460		(45303)		
1461		Comprehensive Services Act Administration	534,967	535,278
1462		(45305)		
1463				806,914
1464	Fund Sources:	General	42,454,758	35,390,902
1465			44,553,177	45,265,338
1466		Federal Trust	32,679,373	27,578,969
1467			37,120,549	37,794,431

1468 Authority: Title 63.1, Chapters 3, 10, 10.1, 11, 11.1, 12.1, and 18, Code of Virginia; P.L. 100-294,  
 1469 P.L. 101-126, P.L. 101-226, P.L. 105-89, as amended, Federal Code.

1470 A.1. Out of the amount for Financial Assistance for Child and Youth Services, \$575,000 from the  
 1471 general fund and \$400,000 from nongeneral funds the first year and \$575,000 from the general fund and  
 1472 \$400,000 from nongeneral funds the second year shall be provided for the purchase of services for  
 1473 victims of domestic violence, child abuse and neglect prevention activities as stated in §§ 63.1-248.7 C  
 1474 and 63.1-319, Code of Virginia, in accordance with regulations promulgated by the Board of Social  
 1475 Services.

1476 2. Out of the amount for Financial Assistance for Child and Youth Services, increased nongeneral  
 1477 fund revenues from Chapter 887, Acts of Assembly of 1993, estimated at \$541,578 the first year and  
 1478 \$541,578 the second year, shall be appropriated for services to victims of domestic violence.

1479 3. Out of the amount for Financial Assistance for Child and Youth Services, \$250,000 from the  
 1480 general fund and \$1,000,000 from the federal TANF grant the first year and \$250,000 from the general  
 1481 fund and \$1,000,000 from the federal TANF grant the second year shall be provided as grants to local  
 1482 domestic violence programs for purchase of crisis and core services for victims of domestic violence,  
 1483 including 24-hour hotlines, emergency shelter, emergency transportation, and other crisis services as a  
 1484 first priority.

1485 B.1. Expenditures meeting the criteria of Title IV-E of the Social Security Act shall be fully  
 1486 reimbursed except that expenditures otherwise subject to a standard local matching share under  
 1487 applicable state policy, including local staffing, shall continue to require local match. The Commissioner  
 1488 shall ensure that local social service boards obtain reimbursement for all children eligible for Title IV-E  
 1489 coverage.

1490 2. Out of the amount for Financial Assistance for Child and Youth Services, \$300,000 the first year  
 1491 and \$300,000 the second year from the general fund shall be allocated to the Pendleton and Chesapeake  
 1492 Childcare Programs.

1493 C. This appropriation includes \$180,200 from the general fund and \$99,800 from nongeneral funds  
 1494 the first year and \$180,200 from the general fund and \$99,800 from nongeneral funds the second year to  
 1495 continue respite care for foster parents.

1496 D. The Commissioner, in cooperation with the Department of Planning and Budget, shall establish a  
 1497 reasonable, automatic adjustment for inflation each year to be applied to the room and board maximum  
 1498 rates paid to foster parents. However, this provision shall apply only in fiscal years following a fiscal  
 1499 year in which salary increases are provided for state employees. The amount of the increase shall be  
 1500 based on inflation in the cost of raising a child as indicated by appropriate inflation indicators selected

1501 by the Department of Planning and Budget.

1502 E. Out of this appropriation shall be provided \$100,000 the first year from the general fund and  
 1503 \$100,000 the second year from the general fund for Volunteer Emergency Families for Children to  
 1504 expand its shelter care network for abused, neglected, runaway, homeless, and at-risk children  
 1505 throughout Virginia.

1506 F. The Department of Social Services shall develop additional performance measures for the adoption  
 1507 subsidy program to measure, over a fiscal year, the percentage of foster care children with a goal of  
 1508 adoption who are placed in adoptive homes and, of those, the average number of months since the  
 1509 termination of parental rights and the average number of months since the goal of adoption was  
 1510 established.

1511 G. The Department of Social Services shall develop and maintain a Memorandum of Understanding  
 1512 with the Comprehensive Health Investment Project (CHIP) of Virginia to pilot the use of foster care  
 1513 prevention funding in Southwest Virginia. Additional funding which may be available through this effort  
 1514 to Southwest Virginia CHIP projects cannot be used to supplant existing resources for those projects.

1515 H. The Department of Social Services (DSS) and the State Executive Council (SEC) of the  
 1516 Comprehensive Services Act (CSA) shall negotiate a Memorandum of Understanding (MOU) regarding  
 1517 Title IV-E coverage of services for Title IV-E eligible children that were previously funded under the  
 1518 Comprehensive Services Act. In developing the MOU, the SEC and DSS shall consult the Department  
 1519 of Medical Assistance Services regarding the impact of the MOU on Medicaid coverage of such  
 1520 services. The Department of Planning and Budget (DPB) shall approve the terms of the MOU to assure  
 1521 they are precise enough to govern any transfer of appropriation from CSA to DSS and to assure that it  
 1522 clearly distinguishes between provisions regarding retroactive charges and current charges. Pursuant to  
 1523 the MOU, funds may be transferred to the Department of Social Services from the Comprehensive  
 1524 Services Act appropriation, upon documentation that demonstrates reduction in CSA costs and transfer  
 1525 of charges to DSS for such services. If DPB determines that savings should result from the difference  
 1526 between the state matching ratio required for Title IV-E and the state share of CSA expenditures, DPB  
 1527 shall unallot the appropriate amount of general fund savings. Such unallotted funds shall be made  
 1528 available only if needed to fund unavoidable deficits in either CSA or DSS foster care and adoptions.  
 1529 Otherwise they shall revert to the general fund of the state treasury.

1530 I. It is the intent of the General Assembly that the Commissioner of the Department of Social  
 1531 Services allow local social services boards to obtain matching federal funds for children participating in  
 1532 Healthy Family sites who are eligible for Title IV-E coverage. Appropriations from the general fund in  
 1533 this Item for Healthy Families may be used to qualify for matching federal funds.

1534 J. The Department of Social Services shall allocate \$600,000 the first year and \$600,000 the second  
 1535 year from the federal Temporary Assistance to Needy Families (TANF) grant for services to children  
 1536 participating in Healthy Families who may qualify for TANF.

1537 383. Not set out.

1538 384. Not set out.

1539 385. Not set out.

1540	386.	Child Support Enforcement Services (46300)	448,732,923	491,262,432
1541		Support Enforcement and Collection Services	69,379,781	69,409,290
1542		(46301)		
1543		Public Assistance Child Support Collections (46302)	10,925,000	10,925,000
1544		Non-Public Assistance Child Support Payments	368,428,142	410,928,142
1545		(46303)		
1546	Fund Sources:	General	4,802,780	<del>4,563,291</del>
1547				6,498,796
1548		Special	398,587,973	<del>441,337,495</del>
1549				439,401,990
1550		Federal Trust	45,342,170	45,361,646

1551 Authority: Title 20, Chapter 9; Title 63.1, Chapters 13 and 14, Code of Virginia; P.L. 104-193, as  
 1552 amended; P.L. 105-200, Federal Code.

1553 A. Any net revenue from child support enforcement collections, after all disbursements are made in  
 1554 accordance with state and federal statutes and regulations, and after the state's share of the cost of  
 1555 administering the program is paid, shall be estimated and deposited into the general fund by June 30 of  
 1556 the fiscal year in which it is collected. Any additional moneys determined to be available upon final  
 1557 determination of a fiscal year's costs of administering the program shall be deposited to the general fund  
 1558 by September 1 of the subsequent fiscal year in which it is collected.

1559 B. In determining eligibility and amounts for cash assistance, pursuant to the Personal Responsibility  
 1560 and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, the Department shall continue  
 1561 to disregard up to \$50 per month in child support payments and return to recipients of cash assistance  
 1562 up to \$50 per month in child support payments collected on their behalf.

1563 C. Amounts disbursed to recipients of cash assistance pursuant to paragraph B of this Item shall be  
 1564 considered part of the Commonwealth's required Maintenance of Effort spending for the federal  
 1565 Temporary Assistance for Needy Families program established by the Social Security Act.

1566 D. The Department shall expand collections of child support payments through contracts with private  
 1567 vendors. However, the Department of Social Services and the Office of the Attorney General shall not  
 1568 contract with any private collection agency, private attorney, or other private entity for any child support  
 1569 enforcement activity until the State Board of Social Services has made a written determination that the  
 1570 activity shall be performed under a proposed contract at a lower cost than if performed by employees of  
 1571 the Commonwealth. Pursuant to § 63.1-249.1 D, Code of Virginia, the Department and the Office of the  
 1572 Attorney General shall each submit a written report, on July 1 of each year, to the Governor and the  
 1573 Chairmen of the House Appropriations and Senate Finance Committees, with a detailed summary and  
 1574 evaluation of the privatization of child support enforcement activities.

1575 387. Not set out.

1576 388. Not set out.

1577 389. Not set out.

1578 390. Not set out.

1579	Total for Department of	1,221,008,336	1,239,541,051
1580	Social Services		
1581		1,228,232,708	1,264,657,693
1582	General Fund Positions	259.76	259.76
1583			263.76
1584	Nongeneral Fund Positions	1,324.74	1,324.74
1585	Position Level	1,584.50	1,584.50
1586			1,588.50
1587	Fund Sources: General	272,409,255	265,896,455
1588		275,192,451	282,733,140
1589	Special	402,675,012	445,424,534
1590			443,489,029
1591	Dedicated Special Revenue	2,308,500	2,308,500
1592	Federal Trust	543,615,569	525,911,562
1593		548,056,745	536,127,024

1594	TOTAL FOR OFFICE OF	5,829,619,187	5,847,184,150
1595	HEALTH AND HUMAN		
1596	RESOURCES		

1597		5,966,647,628	6,092,800,307
1598	General Fund Positions	9321.11	9330.11
1599		9323.49	9336.73
1600	Nongeneral Fund Positions	7781.89	7780.89
1601		7784.27	7783.51
1602	Position Level	17,103.00	17,111.00
1603		17,108.00	17,116.00
1604	Fund Sources: General	2,463,277,020	2,458,378,481
1605		2,537,184,048	2,609,220,795
1606	Special	801,000,428	844,070,998
1607			842,135,493
1608	Enterprise	6,316,197	6,316,197
1609	Trust and Agency	42,000	42,000
1610	Dedicated Special Revenue	107,390,181	108,362,585
1611		112,335,397	110,055,958
1612	Federal Trust	2,451,593,361	2,430,013,889
1613		2,509,969,558	2,525,029,864

1614 OFFICE OF TRANSPORTATION

1615 506. through 524. not set out.

1616 Department of Transportation (501)

1617	525.	Highway System Acquisition and Construction	1,608,354,038	1,399,011,951
1618		(60300)		
1619			1,526,354,038	1,311,511,951
1620		Access Roads and other Construction (60302)	509,929,500	305,636,600
1621			427,929,500	218,136,600
1622		Interstate Construction (60303)	280,922,000	266,605,000
1623		Primary Construction (60304)	234,125,100	241,519,300
1624		Secondary Construction (60306)	238,192,000	238,415,900
1625		Urban Construction (60307)	184,776,400	184,551,400
1626		Construction Management (60309)	70,565,338	71,103,351
1627		Transportation Improvement District Debt Service	7,475,000	7,769,000
1628		(60311)		
1629		Designated Highway Corridor Development Programs	69,807,400	70,756,400
1630		(60312)		
1631		Financial Assistance for Roads and other Construction	12,561,300	12,655,000
1632		(60313)		
1633	Fund Sources:	General	325,584,000	134,347,000
1634			243,584,000	46,847,000
1635		Commonwealth Transportation	1,275,295,038	1,256,895,951
1636		Trust and Agency	7,475,000	7,769,000

1637 Authority: Title 33.1, Chapter 1; §§ 58.1-815, 58.1-815.1, and 58.1-816.1, Code of Virginia; Chapters  
 1638 653 and 676, Acts of Assembly of 1988; Chapters 8, 9, and 12, Acts of Assembly of 1989, Special  
 1639 Session II; and Chapter 391, Acts of Assembly of 1993.

1640 A. Out of the amounts for Financial Assistance for Roads and other Construction, \$7,000,000 the  
 1641 first year and \$7,000,000 the second year from the Commonwealth Transportation Fund shall be  
 1642 allocated for purposes set forth in §§ 33.1-221, 33.1-221.1:1, and 33.1-223, Code of Virginia. Of this  
 1643 amount, the allocation for Recreational Access Roads shall be \$1,500,000 the first year and \$1,500,000  
 1644 the second year. Any balance in the Industrial, Airport and Rail Access program at the end of each  
 1645 fiscal year that exceeds an amount equal to the annual appropriation shall be available in the next fiscal  
 1646 year for allocation to other transportation programs.

1647 B. Out of the amounts for Financial Assistance for Roads and other Construction the following  
 1648 amounts shall be provided for financial assistance to localities and regional agencies for transportation  
 1649 planning: \$5,561,300 the first year and \$5,655,000 the second year from the Commonwealth  
 1650 Transportation Fund.

1651 C. The amount shown for Transportation Improvement District Debt Service shall be derived from  
 1652 payments made to the Transportation Trust Fund pursuant to the Contract between the State Route 28  
 1653 Highway Transportation Improvement District and the Commonwealth Transportation Board dated  
 1654 September 1, 1988. The contract payments may be supplemented from primary funds allocated to the  
 1655 highway construction district in which the project financed is located, or from the secondary system  
 1656 construction allocation to the county or counties in which the project financed is located, and from any  
 1657 other lawfully available revenues of the Transportation Trust Fund, as may be necessary to meet debt  
 1658 service obligations. The payment of debt service shall be for the bonds issued under the  
 1659 "Commonwealth of Virginia Transportation Contract Revenue Bond Act of 1988" (Chapters 653 and  
 1660 679, Acts of Assembly of 1988). Funds required to pay the total debt service on the bonds shall be  
 1661 made available in the amounts indicated in paragraph G of this Item.

1662 D.1. Out of the amounts for Designated Highway Corridor Development Programs, \$40,000,000 the  
 1663 first year and \$40,000,000 the second year shall be paid from the general fund to the U.S. Route 58  
 1664 Corridor Development Fund, hereinafter referred to as the "Fund", established pursuant to § 58.1-815,  
 1665 Code of Virginia. This payment shall be in lieu of the deposit of state recordation taxes to the Fund, as  
 1666 specified in the cited Code section and shall be made on July 1 of each year. Said recordation taxes  
 1667 which would otherwise be deposited to the Fund shall be retained by the general fund. In addition,  
 1668 \$3,500,000 the first year and \$3,500,000 the second year from the Highway Maintenance and Operating  
 1669 Fund shall be provided to the Route 58 Corridor Development Fund. This allocation shall be in addition  
 1670 to any funds currently provided to the Route 58 Corridor Development Fund.

1671 2. \$11,850,000 the first year and \$11,850,000 the second year from the Commonwealth  
 1672 Transportation Fund shall be provided to the Route 58 Corridor Development Fund.

1673 3. Pursuant to the "U.S. Route 58 Commonwealth of Virginia Transportation Revenue Bond Act of  
 1674 1989" (Chapter 8, as amended by Chapter 538 of the 1999 Acts of Assembly), the amounts shown in

paragraph G of this Item shall be available from the Fund for debt service for the bonds previously issued and additional bonds issued pursuant to said act.

4. It is the intent of the General Assembly that the Route 58 Corridor Development Program shall be funded such that the Program is able to support its full amount of authorized debt.

E.1. The Commonwealth Transportation Board shall maintain the Northern Virginia Transportation District Fund, hereinafter referred to as the "Fund." Pursuant to § 58.1-815.1, Code of Virginia, and for so long as the Fund is required to support the issuance of bonds, the Fund shall include at least the following elements:

a) Amounts transferred from Item 269 of this act to this Item;

b) \$11,200,000 the first year and \$11,200,000 the second year from the Commonwealth Transportation Fund shall be provided to the Northern Virginia Transportation District Fund.

c) Any public right-of-way use fees allocated by the Department of Transportation pursuant to § 56-468.1 of the Code of Virginia and attributable to the counties of Fairfax, Loudoun, and Prince William, the amounts estimated at \$4,431,000 the first year and \$5,380,000 the second year;

d) Any amounts which may be deposited into the Fund pursuant to a contract between the Commonwealth Transportation Board and a jurisdiction or jurisdictions participating in the Northern Virginia Transportation District Program, the amounts estimated to be \$816,000 the first year and \$816,000 the second year;

e) \$3,500,000 the first year and \$3,500,000 the second year in surplus revenues from the Highway Maintenance and Operating Fund intended for general construction programs; and

f) It is the intent of the General Assembly that the Northern Virginia Transportation District Program shall be funded such that the Program is able to support its full amount of authorized debt.

2. The Fund shall support the issuance of bonds at a total authorized level of \$466,200,000 for the purposes provided in the Northern Virginia Transportation District, Commonwealth of Virginia Revenue Bond Act of 1993 (Chapter 391, Acts of Assembly of 1993), for the purposes provided in Chapters 470 and 597, Acts of Assembly of 1994 (1994 Amendments to the Northern Virginia Transportation District, Commonwealth of Virginia Revenue Bond Act of 1993), for the purposes provided in Chapters 740 and 761, Acts of Assembly of 1998 (1998 Amendments to the Northern Virginia Transportation District, Commonwealth of Virginia Revenue Bond Act of 1993), and for the purposes provided in Chapter 538 (1999 Amendments to the Northern Virginia Transportation District, Commonwealth of Virginia Revenue Bond Act of 1993).

3. Pursuant to the Northern Virginia Transportation District, Commonwealth of Virginia Revenue Bond Act of 1993, Chapter 391, Acts of Assembly of 1993 as amended by Chapters 470 and 597 of the Acts of Assembly of 1994, Chapters 740 and 761 of the Acts of Assembly of 1998, and Chapter 538 of the 1999 Acts of Assembly, amounts shown in paragraph G of this Item shall be available from the Fund for debt service for the bonds previously issued and additional bonds issued pursuant to said act.

4. Should the actual distribution of recordation taxes to the localities set forth in § 58.1-815.1, Code of Virginia, exceed the amount required for debt service on the bonds issued pursuant to the above act, such excess amount shall be transferred to the Northern Virginia Transportation District Fund in furtherance of the program described in § 33.1-221.1:3, Code of Virginia.

5. Should the actual distribution of recordation taxes to said localities be less than the amount required to pay debt service on the bonds, the Commonwealth Transportation Board is authorized to meet such deficiency, to the extent required, from funds identified in Enactment No. 1, Section 11, of Chapter 391, Acts of Assembly of 1993.

F.1. The Commonwealth Transportation Board shall maintain the City of Chesapeake account of the Set-aside Fund, pursuant to § 58.1-816.1 which shall include funds transferred from Item 284 of this act to this Item, including such local revenues from the City of Chesapeake as may be received pursuant to a contract or other alternative mechanism for the purpose provided in the Oak Grove Connector, City of Chesapeake Commonwealth of Virginia Transportation Program Revenue Bond Act of 1994.

2. Pursuant to the Oak Grove Connector, Commonwealth of Virginia Transportation Program Revenue Bond Act of 1994 (Chapters 233 and 662, Acts of Assembly of 1994), the amounts shown in paragraph G of this Item shall be available from the City of Chesapeake account of the Set-aside Fund for debt service for the bonds issued pursuant to said act.

3. Should the actual distribution of recordation taxes and such local revenues from the City of Chesapeake as may be received pursuant to a contract or other alternative mechanism to the City of Chesapeake account of the Set-aside Fund be less than the amount required to pay debt service on the bonds, the Commonwealth Transportation Board is authorized to meet such deficiency, pursuant to Enactment No. 1, Section 11 of the Oak Grove Connector, City of Chesapeake Commonwealth of Virginia Transportation Program Revenue Bond Act of 1994 (Chapters 233 and 662, Acts of Assembly of 1994).

4. The amount appropriated for Interstate Construction includes \$589,687 the first year and \$589,687

1736 the second year to be transferred to the Department of State Police's Highway Patrol Services. These  
 1737 funds are for eight positions dedicated to the I-95/395/495 interchange improvement project and are part  
 1738 of State Highway Project No. 0095-029-F20 and Federal Project No. NH-95-2 (410).

1739 G. Pursuant to various Payment Agreements between the Treasury Board and the Commonwealth  
 1740 Transportation Board, funds required to pay the debt service due on the following Commonwealth  
 1741 Transportation Board bonds shall be transferred to the Treasury Board pursuant to paragraphs C, D 2, E  
 1742 3, and F 2 of this Item:

	FY 2001	FY 2002
1743		
1744 Transportation Contract Revenue Refund Bonds, Series 1992 (Route 28)	\$8,802,675	\$8,805,125
1745 Commonwealth of Virginia Transportation Revenue Bonds: U.S. Route 58		
1746 Corridor Development Program:		
1747 Series 1993A	\$9,920,684	\$9,917,997
1748 Series 1993B	\$7,237,143	\$7,235,823
1749 Series 1996B	\$8,111,592	\$8,112,592
1750 Series 1997C (Refunding)	\$4,877,749	\$4,881,549
1751 Series 1999B	\$14,858,610	\$14,857,610
1752 Additional Bonds	\$8,000,000	\$8,000,000
1753 Northern Virginia Transportation District Program:		
1754 Series 1993C	\$9,499,134	\$9,496,464
1755 Series 1995A	\$2,154,520	\$2,155,350
1756 Series 1996A	\$5,188,759	\$5,188,009
1757 Series 1997B (Refunding)	\$2,337,573	\$2,335,373
1758 Series 1999A	\$2,414,609	\$2,415,359
1759 Additional Bonds	\$14,852,405	\$15,805,445
1760 Transportation Program Revenue Bonds:		
1761 Series 1997A (Oak Grove Connector, City of Chesapeake)	\$2,329,120	\$2,330,120

1762 H. The Director, Department of Planning and Budget, is authorized to adjust the source and amount  
 1763 of appropriation in this item for debt service associated with bonds issued for Route 58 and the  
 1764 Northern Virginia Transportation District program based on actual debt service requirements needed  
 1765 during the biennium.

1766 I. Contingent upon the passage of Senate Bill 33/House Bill 608, as passed by the 2000 Session of  
 1767 the General Assembly and as such bill becomes law, the proceeds of the Federal Highway  
 1768 Reimbursement Anticipation Notes shall be expended for the projects in accordance with the terms and  
 1769 conditions of Senate Bill 33/House Bill 608. Out of the amounts provided for this Item, a sum sufficient  
 1770 amount shall be provided from federal highway and highway assistance reimbursements for the debt  
 1771 service payments on the Federal Highway Reimbursement Anticipation Notes. In accordance with  
 1772 Chapters 1019 and 1044, Acts of Assembly of 2000, the project list as included in Enactment 3 of such  
 1773 chapters is amended to include Route 288 for funding from the proceeds of the Federal Highway  
 1774 Reimbursement Anticipation Notes. The amount of outstanding issued Federal Reimbursement  
 1775 Anticipation Notes shall not exceed \$800,000,000 at any one time.

1776 J. Notwithstanding the amounts specified in § 33.1-75.1 C and D of the Code of Virginia,  
 1777 \$15,000,000 per year in Commonwealth Transportation Funds shall be allocated to localities for  
 1778 secondary road revenue sharing.

1779 K. Out of the amounts for this item, \$1,000,000 shall be transferred to the Governor's Development  
 1780 Opportunity Fund to reimburse the Fund for outlays made to Loudoun County for construction of a road  
 1781 related to attracting a major employer.

1782 L. Out of the amounts for Northern Virginia's Primary Construction, the Commonwealth  
 1783 Transportation Board shall allocate \$500,000 the first year to make improvements to Route 193,  
 1784 consistent with the findings of a 1999 Department of Transportation study of traffic calming alternatives  
 1785 for Georgetown Pike, Route 193.

1786 M. Out of this appropriation the first year, the Commonwealth Transportation Board is encouraged to  
 1787 make improvements to Route 86 in the City of Danville at George Washington High School that ensure  
 1788 the safety of the students. These improvements shall be made in coordination with the Danville School  
 1789 Superintendent.

1790 N. Any funding provided to Route 460 improvements from Suffolk to Petersburg shall include the  
 1791 necessary feasibility, environmental, and demand analyses for consideration of high-speed rail.

1792 O. Out of the amounts included in this Item, there is hereby appropriated \$157,284,000 the first year  
 1793 and \$0 the second year from the general fund for specified highway projects, notwithstanding the  
 1794 provisions of § 6 of Enactment 4 of Chapter 1019 and Chapter 1044, Acts of Assembly of 2000.

1795 P. Out of the amounts included in this Item, there is hereby appropriated \$20,585,038 the first year  
 1796 and \$2,200,000 the second year from the general fund for the mass transit assistance program for a

1797 statewide new transit vehicle and equipment program, notwithstanding the provisions of § 1 of  
1798 Enactment 4 of Chapter 1019 and Chapter 1044, Acts of Assembly of 2000.

1799 Q. Out of the amounts included in this Item, there is hereby appropriated \$0 the second year from  
1800 the general fund for a statewide competitive capital grant program for privately owned designated  
1801 reliever airports, notwithstanding the provisions of § 3 of Enactment 4 of Chapter 1019 and Chapter  
1802 1044, Acts of Assembly of 2000.

1803 R. Out of the amounts included in this Item, there is hereby appropriated \$23,000,000 the first year  
1804 from the general fund for the Virginia Airports Revolving Loan Fund pursuant to Chapter 2.1  
1805 (§ 5.1-30.1 et seq.) of Title 5.1 of the Code of Virginia, notwithstanding the provisions of § 2 of  
1806 Enactment 4 of Chapter 1019 and Chapter 1044, Acts of Assembly of 2000.

1807 526 through 529. Not set out.

1808 530 and 531. Omitted.

1809 532 through 539. Not set out.

1810	TOTAL FOR OFFICE OF	3,221,640,924	3,051,329,912
1811	TRANSPORTATION		
1812		3,139,640,924	2,963,829,912
1813	Nongeneral Fund Positions	12,719.00	12,719.00
1814	Position Level	12,719.00	12,719.00
1815	Fund Sources: General	325,584,000	134,347,000
1816		243,634,099	46,897,099
1817	Special	21,681,815	21,704,874
1818	Commonwealth Transportation	2,772,131,169	2,791,259,994
1819	Trust and Agency	51,233,107	51,545,711
1820	Debt Service	47,187,000	48,648,500
1821	Federal Trust	3,773,734	3,773,734

## 1822 CENTRAL APPROPRIATIONS

1823 540. through 541. Not set out.

1824	541.10	Reversion Clearing Account - Appropriation	(46,372,226)	(16,961,060)
1825		Reduction (Operating) (223000)		
1826	Fund Sources:	General	(46,372,226)	(16,961,060)

1827 Authority: Discretionary Inclusion.

1828 A. The State Comptroller shall revert an amount estimated at \$3,724,563 representing balances as of  
1829 June 30, 2000 in the Department of Mental Health, Mental Retardation and Substance Abuse Services  
1830 that had been previously reappropriated. Such amount is hereby appropriated to this item.

1831 B. The Director of the Department of Planning and Budget shall transfer to this item an amount  
1832 estimated at \$5,500,000 representing the funding provided for textile workers' health benefits  
1833 appropriated by the 2000 General Assembly and subsequently vetoed by the Governor.

1834 C. The Department of Medical Services Assistance shall deposit to the general fund an amount  
1835 estimated at \$27,433,907 in fiscal year 2000-2001 and \$6,441,255 in fiscal year 2001-2002 representing  
1836 Medicaid recoveries from prior year activities. Such amounts deposited are hereby appropriated to this  
1837 item.

1838 D. Included in this item shall be additional revenue accruing to the general fund in an amount  
1839 estimated at \$1,000,000 in fiscal year 2000-2001 and \$1,000,000 in fiscal year 2001-2002 pursuant to  
1840 House Bill 2145.

1841 E. The State Comptroller shall transfer to this item an amount estimated at \$3,892,860 in fiscal year  
1842 2000-2001 and \$3,892,860 in fiscal year 2001-2002 from the University of Virginia Medical Center in  
1843 recognition of the Commonwealth's ongoing financial support of indigent care.

1844 A. The Director of the Department of Planning and Budget shall transfer to this item from the  
1845 general fund of the state treasury an amount estimated at \$837,465 in fiscal year 2000-2001 and  
1846 \$910,735 in fiscal year 2001-2002 from the Educational and General Programs of the following  
1847 colleges and universities based on delayed opening dates of educational facilities.

1848	Institution	2000-01	2001-02
1849	College of William and Mary	\$15,930	\$0
1850	University of Virginia	\$22,660	\$199,290

1851	Virginia Polytechnic Institute and State	\$47,690	\$248,435
1852	University		
1853	James Madison University	\$0	\$58,070
1854	Old Dominion University	\$0	\$71,940
1855	Virginia Commonwealth University	\$171,545	\$0
1856	University of Virginia's College at Wise	\$0	\$69,000
1857	Virginia Community College System	\$579,640	\$264,000
1858	<b>Total</b>	<b>\$837,465</b>	<b>\$910,735</b>

1859 *B. The Director of the Department of Planning and Budget shall transfer to this item an amount*  
 1860 *from the general fund of the state treasury estimated at \$495,488 in fiscal year 2000-2001 and \$539,156*  
 1861 *in fiscal year 2001-2002 from the Virginia Community College System based on revised estimates of*  
 1862 *lease payments for equipment.*

1863 *C. The Director of the Department of Planning and Budget shall transfer to this item an amount*  
 1864 *from the general fund of the state treasury estimated at \$2,007,054 in fiscal year 2001-2002 in the*  
 1865 *Division of Community Correction in the Department of Corrections based on level funding substance*  
 1866 *abuse treatment as part of the Governor's Substance Abuse Reduction Effort (SABRE) Program.*

1867 *D. The Director of the Department of Planning and Budget shall transfer to this item an amount*  
 1868 *from the general fund of the state treasury estimated at \$1,000,000 in fiscal year 2001-2002 from the*  
 1869 *Department of Criminal Justice Services based on level funding substance abuse treatment as part of the*  
 1870 *Governor's Substance Abuse Reduction Effort (SABRE) Program.*

1871 *E. The Director of the Department of Planning and Budget shall transfer to this item an amount*  
 1872 *estimated at \$1,170,000 from the general fund appropriation in the second year in the Department of*  
 1873 *Juvenile Justice based on level funding substance abuse treatment as part of the Governor's Substance*  
 1874 *Abuse Reduction Effort (SABRE) Program.*

1875 *F. On or before June 30, 2001, the State comptroller shall revert to the general fund the following*  
 1876 *amounts from the agency fund code and project code listed; provided, however, that the Director of the*  
 1877 *Department of Planning and Budget may direct the restoration of any portion of the reverted amount if*  
 1878 *the Director shall subsequently verify an unpaid obligation that cannot be paid as a result of this*  
 1879 *reversion:*

1880	<i>Agency Code</i>	<i>Project Code</i>	<i>Fund Code</i>	<i>Amount</i>
1881	127	15163	0100	1,481,860
1882	219	15428	0100	24,768
1883	949	16513	0100	45,315
1884	799	16335	0200	621,000
1885	<b>Total</b>			<b>2,172,943</b>

1886 *G. On or before June 30, 2001, the State Comptroller shall revert to the general fund an amount*  
 1887 *estimated at \$315,000 from the Export Loan Fund at the Department of Business Assistance. Such*  
 1888 *amount is hereby appropriated to this item.*

1889 *H. On or before June 30, 2001, the State Comptroller shall revert to the general fund an amount*  
 1890 *estimated at \$1,000,000 from the Virginia Economic Development Revolving Fund at the Department of*  
 1891 *Business Assistance. Such amount is hereby appropriated to this item.*

1892 **2. That, in cooperation with the Department of Treasury and other state agencies, the Department**  
 1893 **of Rail and Public Transportation may develop a program to assist mass transit properties in**  
 1894 **financing agreements, not to exceed five years, to acquire new transit vehicles and equipment.**

1895 **3. That no provision of this act shall alter the effect of any and all budget actions that have been**  
 1896 **taken, or will be taken, pursuant to the Governor's Executive Order Seventy-four (01) issued on**  
 1897 **February 24, 2001.**

1898 **4. That this act is effective on its passage, as provided in subsection C of § 1-12 of the Code of**  
 1899 **Virginia.**