				Line Items in State Spend	ling Plans for Enhanced ARP	HCBS Funding	
State Category	Title	Program Type	Funding Stream		ending (\$M) Population/Service Area		Details
CA Workforce	In-Home Supportive Services Upskilling Pilots	Subsidized training and direct payments	Provider contracts	\$ 68.40 \$	150.00 BH, LTC	Provider organizations; DSPs; governmental agency	The State will determine the process by which any required contracting and payment to identified training programs occurs. Efforts will also be made to ensure that specialized training is linked to existing career pathways, licensing, and certification to further expand the IHSS providers' ability for career advancement. IHSS providers that complete a State-identified, with stakeholder input, pilot specialized training pathway will receive a \$3.00/hour pay differential when enrolled to provide services to a recipient with the care need for which they completed specialized training.
							A new statewide Direct Care Workforce Training and Stipends Program – leveraging on-line learning innovations, rooted in adult learner principles, and delivered i
CA Workforce	Direct Care (non-IHSS) Workforce Training	Subsidized training and direct payments	State-administered program	\$ 150.00 \$	150.00 LTC	DSPs	multiple languages with cultural competency - will be provided to direct care workers caring for adults in HCBS (non-HSS) programs. This funding would provide a one-time incentive payment of \$500 to each current IHSS provider that provided IHSS to program recipient(s) during a minimum of
CA Workforce	IHSS HCBS Care Economy Payments	Direct payments	State-administered program	\$ 137.50 \$	275.00 LTC	DSPs	three months between March 2020 and December 2020 of the pandemic This funding would provide a one-time incentive payment of \$500 to each current direct care, non-IHSS provider of Medi-Cal home and community-based services
CA Workforce	Non-IHSS HCBS Care Economy Payments	Direct payments	State-administered program	\$ 6.25 \$	12.50 LTC	DSPs	during a minimum of three months between March 2020 and December 2020. Grants would be provided to clinics, physician offices, hospitals, private duty nursing providers, home health providers, or other
CA Workforce	Increasing HCBS Clinical Workforce	Provider grants for workforce investment	Provider contracts	\$ 100.00 \$	100.00 LTC, disabilities	Provider organizations	clinical providers. To be eligible for funds, the provider would need to demonstrate significant Medi-Cal patient caseload. Grants can pay for loan repayment, sign on bonuses, training and certification costs, etc.
CA Workforce	PATH for Homeless and HCBS Direct Care Providers	Supplemental funding for waiver programs	?	\$ 50.00 \$	LTC, homeless, justice 100.00 system	Provider organizations; governmental agency	Funding will support outreach efforts to publicize job opportunities, workforce development strategies to train staff in evidenced based practices, implement information technology for data sharing, and will support training stipends.
CA Delivery System	Medicare Partnerships and Shared Savings on Supplemental HCBS Benefit Services	State incentive programs	State-administered program	\$ 100.00 \$	100.00 Duals	Provider organizations; plans	 incentives to invest in models of care that reduce inpatient or short-term nursing home stays; 2) a Medicare and Medicaid Shared Savings program with the federal government; 3) incentives to Medicare Advantage plans to develop innovative approaches for integrated models of care; 4) partnerships and incentives to provide HCBS to Medicare fee-for-service beneficiaries.
CA Program Capacity		Provider grants for capacity expansion	Provider contracts	\$ 10.00 \$	10.00 I/DD	Provider organizations	The proposal includes funding to expand capacity of six (6) existing TBI sites and to award up to six (6) additional TBI sites in unserved/underserved areas.
CA Workforce	Developmental Services Workforce Investment	Direct payments	?	\$ 135.00 \$	215.00 I/DD	DSPs	 Provide current DSPs \$500 and offer \$500 to DSPs, upon hire. 2) This training program provides DSPs an opportunity to receive a one-time training bonus upon completion of enhanced training.3) for shortterm counseling, support and resource referral service to assist DSPs and their families in managing difficult life events.
			Provider contracts	\$ 51.00 \$	75.00 I/DD		The Budget proposes funding to establish one community navigator per regional center (21 total) to assist families in navigating regional center and generic resources. This additional investment will add 42 additional navigators, to the proposed 21.
	n Community Navigator/Implicit Bias Training	Provider grants for capacity expansion	. Swider contracts			Provider organizations	This investment supports the interoperability between the proposed ADRC technology and data systems with CBOs, health plans, and counties, in line with the CalAIM goals for statewide Managed Long-Term Services and Supports for all Californians participating in Medi-Cal and with the new Office of Medicare Innovation
CA Care Coordination	n No Wrong Door/Aging and Disability Resource Connections	HIT investment	?	\$ 5.00 \$	5.00 Care coordination	Plans; provider organizations; governmental agency	and Integration. 1) Screening older adults for Alzheimer's and related dementias to ensure early detection and timely diagnosis. 2) Make continuing education in
CA Care Protocols	Dementia Aware and Geriatric/Dementia Continuing Education	Subsidized training and protocol development	?	\$ 25.00 \$	25.00 LTC	Provider organizations	geriatrics/dementia available to all licensed health/primary care providers, in partnership with Department of Consumer Affairs and OSHPD, by 2024 This proposal would provide increased respite care, behavioral health services, and other supports to meet intensified needs due to pandemic pressures on familie
CA Program Capacity	y Caregiver Resource Centers	Provider grants for capacity expansion	Provider contracts	\$	5.00 LTC	Provider organizations	Inis proposal would provide increased respite care, behavioral nearth services, and other supports to meet intensified needs due to pandemic pressures on familie through 11 Caregiver Resource Centers and 33 Area Agencies on Aging.
	n Individuals with Developmental Disabilities Resource Navigation Portal	Statewide resource	State-administered program	\$ 5.60 \$	7.00 I/DD	Governmental agency	This proposal would develop an online portal identifying resources for regional center consumers, families, and regional center staff.
CA Care Protocols	Emergency Department HCBS Connections Toolkit	Protocol development	?	\$ 50.00 \$	50.00 BH, LTC, homeless	?	The funding will be used to create toolkits for Emergency Departments to provide pre-packaged resources, training, and information on local connections to services. Tools will be created with subject matter experts and leverage work such as the Geriatric Emergency Collaborative, CalBridge BH Navigator work, and homelessness resources.
CA Care Protocols	Mental Health First Aid in Schools and Back-to-School Toolkit	Public education and outreach	?	\$ 75.00 \$	75.00 Children	Governmental agency; schools	 Training/public education program for schools; 2) public media campaign; 3) connections with existing training programs (CalHOPE Communities of Practice); 4 training and engagement of youth as peer navigators.
	Community Based Residential Continuum Pilots for Vulnerable, Aging, and Disabled				BH, LTC, disabilities,		The Community Based Residential Continuum Pilots would provide medical and supportive services in home and community care settings (home, ABFs, RCFEs)
CA Program Capacity	y Populations y Eliminating Assisted Living Waiver Waitlist	Pilot program Provider grants for capacity expansion	MCO/plan-administered funding	g \$ 286.00 \$ \$ 85.00 \$	774.00 homeless 255.00 LTC	Plans; downstream provider organizations	supportive services in home and community care settings (home, ARFs, RCFEs) Add 7,000 slots to the Assisted Living Waiver
	Expanding Capacity of Independent Living Centers	Provider grants for capacity expansion	Provider contracts	\$ 10.00 \$	10.00 Disabilities	: Provider organizations; governmental agency	The proposal prevents institutionalization by establishing a Community Living Fund for one-time community transition costs to help persons with disabilities to transfer home from a congregate setting.
CA Housing	Housing and Homelessness Incentive Program	State incentive programs	MCO/plan-administered fundin		LTC, disabilities, homele 2,000.00 justice system		Medi-Gal managed care plans would be able to earn incentive funds for making investments and progress in addressing homelessness and keeping people housed. There would be a requirement that 85% of the funds go to beneficiaries, providers, and/or counties. Managed care plans [] must submit a Homelessness Plan to DHCS. The Homelessness Plans must identify what services will be offered, how referrals will be made, how other local, state, and federal funding streams will be leveraged, and how progress will be tracked towards goals including numbers served and other incentive performance measures.
							1) Develop affordable housing with a requirement for restricted use for individuals with IDD. Funds to match existing funding sources and used to secure carve ou
CA Housing	Affordable Housing for Individuals who have IDD	TBD	TBD	\$ 150.00 \$	150.00 I/DD	TBD	or set-asides. 2) Provide rental assistance to IDD consumers Revisiting and expanding the pilot for Small Home facilities, for both quality of care and quality of jobs; facilitating in-room broadband access for residents; and disaster readiness improvements for facilities and systems, to respond to wildfires, earthquakes, and other emergencies where residents are especially vulnerabl
	y Nursing Home Recovery & Innovation	TBD	TBD	\$ 50.00 \$	50.00 Nursing homes	TBD	among other innovations.
CA Program Capacity	y Alzheimer's Day Care and Resource Centers	TBD	TBD	\$ 10.00 \$	10.00 LTC	TBD	Expand dementia-capable services at licensed Adult Day and Adult Day Health centers Pilot Adult Eamily Homes for older adults in one county. Adult Eamily Homes offer the opportunity for up to two adult individuals to reside with a family and share
CA Brogram Granita	y Adult Family Homes for Older Adults	Pilot program	Provider contracts	\$ 9.10 \$	9.10 LTC	Provider organizations	Pilot Adult Family Homes for older adults in one county. Adult Family Homes offer the opportunity for up to two adult individuals to reside with a family and share in the interaction and responsibilities of being part of a family unit, while the family receives a stipend and support from a local Family Home Agency (FHA) for comparing the backle individuals.
	y Family Homes for Older Adults y Family Home Agency	Priot program Provider grants for capacity expansion	Provider contracts Provider contracts	\$ 9.10 \$	9.10 LTC 61.70 I/DD	Provider organizations Provider organizations	caregiving for the adult individual(s). This proposal would provide pass through funds to family home providers and include a differential for multi-cultural/multi-lingual families.
	y Coordinated Family Support Service	Pilot program	TBD	\$ 75.00 \$	125.00 I/DD	TBD	Pilot a new service for families similar to supported living services provided outside the family home. The pilot would assist families in coordinating the receipt/delivery of multiple services.
			TBD			TBD	Support the transition out of services provided in sheltered work settings to a new model of service that is time-limited, person-centered and focused on a
	y Reimagine Work Activity Programs	Grant program		\$ 9.00 \$	15.00 I/DD		"Pathway Forward" to employment connecting to Paid Internship Programs or Competitive Integrated Employment and measuring outcomes. The grant program will be for regional centers to work with CBOs and local park and recreation departments to leverage existing resources and develop integrate
	Y Enhanced Community Integration for Children and Adolescents Capacity Expansion for Deaf Community	Grant program Grant program	TBD TBD	\$ 50.00 \$ \$ 10.00 \$	50.00 I/DD children 15.00 I/DD	Provider organizations Provider organizations	and collaborative social recreational activities. Funding will provide regional centers the ability to contract for communication assessments that will be used in developing Individual Program Plans.
							DHCS proposes to offer contingency management via a pilot, as it is the only treatment repeatedly shown in studies to work for stimulant use disorder. Contingen management uses small motivational incentives combined with behavioral treatment as an effective treatment for stimulant use disorder. The Department
CA Program Capacity CA Data and HIT	y Contingency Management Long-Term Services and Supports Data Transparency	Pilot program Statewide resource	TBD State-administered program	\$ 31.70 \$ \$ 20.00 \$	58.50 Substance abuse 20.00 LTC	TBD Governmental agency	proposes to implement the motivational incentives through a mobile application that will be accessible to patients through smart phones, tablets or computers. This is a multi-department initiative to improve long-term services and supports (LTSS) data transparency, including utilization, quality, and cost data.
				¢ 470.¢			Older adults and adults with disabilities eligible for Medi-Cal tele-health services and participating in HCBS will be provided tablets or other appropriate devices for
	Addressing Digital Divide for Adults with HCBS System Improvement	Provider grants for capacity expansion Statewide resource	Provider contracts State-administered program	\$ 4.70 \$ \$ 145.00 \$	9.50 LTC, disabilities 145.00 I/DD	Provider organizations Governmental agency	telehealth, along with broadband and tech support (including expanded language access for tech support). 1) Outcomes-based purchasing system for DDS. 2) Update statewide information technology. 3) Investment in government staff needs.
							1) Reduce service coordinator ratios. 2) Support person-centered planning for approximately 15,000 individuals per year. 3) Support Community Placement Plans that pilot new services, including first-responder training, resources for underserved populations, services that are culturally and linguistically sensitive, enhance
	y System Improvement	Provider grants for capacity expansion	Provider contracts	\$ 36.80 \$	111.00 I/DD	Provider organizations	pathways for employment (College to Career) and services that promote independence (employment).
CA Intragovernmenta	al Ombudsman Office and Restructuring	Statewide resource	State-administered program	\$ 10.00 \$	20.00 I/DD	Governmental agency	This proposal would establish an Ombudsperson's Office at DDS and redesign the appeal and Fair Hearing process.

Workforce	Hiring and Retention Bonuses for DSPs	Provider grants for workforce investment	Rate enhancements	\$	100.00 \$	300.00 LTC, I/DD, BH	Provider organizations; DSPs	6-month rate enhancement, with the requirement to pass through 90% of funds to DSPs as financial compensation
Workforce	Other Workforce Development Programs (Rounds 2/3)	TBD	TBD	\$	100.00 \$	100.00 TBD	TBD	May include pipeline programs (internships, new certifications, stipends for certifications), training programs, supports for workers (e.g., child care, loan repayment), or employer-workforce partnerships
WORKDICE	Other workforce Development Programs (Rodnos 2/5)	160	180	Ş	100.00 \$	100.00 180	160	May include HCBS Promotion and Navigation (care coordination and navigators, esp. from inpatient to community); transitions (community-based supports, ho
								assistance, etc.), diversion from facility-based care (Community Behavioral Health Centers for BH urgent care; family caregiver resources), and pilot care mode
Program Capacity	HCBS Access and Promotion	TBD	TBD	\$	200.00 \$	200.00 TBD	TBD	(hospital at home, tenancy/housing resources, home modification, family caregiver supports and training)
								May include consumer connections (e.g., consumer-facing webpage, provider directories, uniform core assessment, connectivity assistance, and technology
Data and UIT	UCDC Taskasland after the structure	UNT in order and	700	~	100.00	100.00 TRD	TBD	support), coordination (data exchange infrastructure, CBO access to ADT data, and communication across providers/CBOs/caregivers), and outcomes (creation
Data and HIT	HCBS Technology and Infrastructure Medical Homes for Children with Complex Medical Conditions	HIT investment TBD	TBD TBD	Ş	100.00 \$	100.00 TBD Children	TBD	public LTSS dashboard) Fund a medical home program to focus on the comprehensive coordination of care for children with complex medical conditions.
care coordination	Wedical Homes for Children with Complex Medical Conditions	180	180			Children	180	Provide financial support to adult daily living providers to make physical, operational, or other changes to ensure services are delivered safely during the reope
Program Capacity	Safe Reopening of Adult Daily Living Programs	TBD	TBD			LTC	TBD	of day centers.
	I County Infrastructure	Statewide resource	State-administered program			TBD	TBD	Strengthen county infrastructure by providing funding to expand county staffing to accommodate growth in home and community-based waiver programs
								1) Enhance quality of care by funding a nurse's ability to shadow the current nurse for private duty nursing cases. 2) Incentivize the use of value-based purchas
Workforce	Nursing Workforce Initiatives	Provider grants for workforce investment	Provider contracts			LTC	TBD	initiatives that reduce missed shifts to strengthen nursing services.
Workforce						170 1/00	TBD	Increase/refresh rates for early intervention, Community HealthChoices and Omnibus Budget Reconciliation Act workers, the Living Independence for the Elder
worktorce	Rate Enhancements	Provider grants for capacity expansion	Rate enhancements			LTC, I/DD	160	(LIFE) program, Office of Developmental Programs services, and general provider rates to support training.
Program Capacity	Supplies and Equipment	TBD	TBD			Children, general	TBD	1) Supplies for early intervention providers to resume in-person visits. 2) PPE and testing for HCBS providers. 3) Emergency preparedness kits for HCBS recipie
	and the second se							1) Create an online education and training portal for shift care nursing to strengthen supports to nursing professionals. 2) Enhance shift nursing services throug
Workforce	Nursing Training Initiatives	Subsidized training and protocol development	TBD			LTC	TBD	training hubs for families and nurses to train together on complex cases.
Care Protocols	Medical Home Learning Network for Children with Complex Medical Conditions	Subsidized training and protocol development	TBD			Children	TBD	Develop a medical home learning network to expand communications and supports to providers serving children with medical complexities.
Workforce	I/DD Provider Training and Credentialing	Subsidized training and protocol development	TBD			I/DD	TBD	Enhance quality of service provision for individuals with intellectual disabilities/autism [through] provider training and credentialing.
			70.0				700	Expand the workforce with student loan forgiveness programs to recruit a diversified workforce into employment in mental/behavioral health and substance used in the student loan forgiveness programs to recruit a diversified workforce into employment in mental/behavioral health and substance used in the student loan forgiveness programs to recruit a diversified workforce into employment in mental/behavioral health and substance used in the student loan forgiveness programs to recruit a diversified workforce into employment in mental/behavioral health and substance used in the student loan forgiveness programs to recruit a diversified workforce into employment in mental/behavioral health and substance used in the student loan forgiveness programs to recruit a diversified workforce into employment in mental/behavioral health and substance used in the student loan forgiveness programs to recruit a diversified workforce into employment in mental/behavioral health and substance used in the student loan forgiveness programs to recruit a diversified workforce into employment in mental/behavioral health and substance used in the student loan forgiveness programs to recruit a diversified workforce into employment in mental/behavioral health and substance used in the student loan forgiveness programs to recruit a diversified workforce into employment in mental/behavioral health and substance used in the student loan forgiveness programs to recruit a diversified workforce into employment in mental/behavioral health and substance used in the student loan forgiveness programs to recruit a diversified workforce into employment in mental/behavioral health and substance used in the student loan forgiveness programs to employment loan forgiveness program
Workforce Program Canacity	BH Loan Forgiveness Caregiver Support Services	Subsidized training TBD	TBD TBD			BH I/DD	TBD TBD	disorder fields of work. Provide respite and family support services to those on waiting lists for Intellectual Disabilities/Autism Services.
Data and HIT	Direct Care Worker Registry	TBD	TBD			General	TBD	Provide respite and raminy support services to trose on warting issts or intellectual bisadilities/Addism Services. Develop a registry of direct care workers that allows participants to locate, review and contact direct care workers who will best meet their care needs.
buta dila fili	biree eare worker registry	155	100			General	155	Echance technology available to HOBS providers and their network (e.g., remote support technology for HOBS providers, assistive technology, electronic incide
Data and HIT	Technology to Support Functional Capabilities of People with Disabilities	TBD	TBD			Disabilities	TBD	detection reporting systems, technology for support coordination organizations, etc.)
Program Capacity	Incentives to Transition from Nursing Homes	State incentive programs	MCO/plan-administered fundin	ng		LTC	TBD	Enhance transitions into the community by incentivizing managed care organizations to meet nursing home transition goals.
Housing	Housing Adaptations for Transitions to the Community	TBD	TBD			LTC	TBD	Purchase housing adaptations for those transitioning from institutional or congregate settings.
Program Capacity	Expansion of Waiver Capacity	TBD	TBD			LTC	TBD	Expand consolidated waiver capacity to transfer additional individuals from facility care.
								1) Establish residential policitic receives conters that treat infants have substance superal and reside supports to their support taleboalth country
								 Establish residential pediatric recovery centers that treat infants born substance-exposed and provide supports to their caregiver. 2) Support telehealth ser with funding for providers to purchase equipment and training supports to enhance its usage. 3) Provide for technical assistance to implement assisted outpation.
								therapy for enhanced outpatient treatment for individuals in the civil court system who experience serious mental illness. 4) Support the reopening and
Program Capacity	Mental Health and Substance Use Disorder Services	TBD	TBD			BH	TBD	administration of virtual drop-in centers used to provide a non-clinical support setting for persons in mental health and substance use disorder recovery.
Workforce	Mental Health Services for HCBS Workers	TBD	TBD			DSPs	TBD	Fund the administration and delivery of mental health counseling and support groups for frontline pandemic workers.
Workforce	Student Assistant Program Liaisons	TBD	TBD			Children	TBD	Employ additional student assistance program liaisons to assist in identifying key behavioral health issues in school-aged children.
Workforce	Certified Peer Specialists Scholarships	Subsidized training and direct payments	TBD			BH	TBD	Fund scholarships to expand the number of certified peer specialists in Pennsylvania to ensure a strong workforce in mental health service settings.
Care Coordination	Incentives to Complete Care Plans	State incentive programs	TBD			General	TBD	Incentivize completion of care plans to improve care coordination and care management activities.
Workforce	Enhanced Training for Private Duty Nurses	Subsidized training	TBD			Children	TBD	Provide for enhanced training for private duty nurses to staff cases for children who have complex medical conditions as well as significant behavioral health
		····· u						Invest in technology to enhance care coordination for individuals receiving private duty nursing services by connecting home health agencies with Pennsylvania
Data and HIT	Home Health Agency Network Connections	HIT investment	TBD			LTC	TBD	Patient Provider Network
Data and HIT	EHRs for State Hospitals and HCBS Facilities	HIT investment	TBD			General	TBD	Introduce the use of electronic health records by state hospitals and HCBS facilities and ensure they are interoperable with the Health Information Exchange.
Workforce	Comprehensive Training for Direct Care Workers	Subsidized training	TBD TBD			DSPs	TBD TBD	Enhance the comprehensive training program for direct care workers to bolster the quality of services for participants.
Program Capacity	SDH Grants for HCBS Providers	Grant program	IRD			General	IRD	Issue one-time grants to HCBS providers that have innovative ideas that will address social determinants of health.
Program Canacity	Transitions and Diversions from Psychiatric State Hospitals	Provider grants for capacity expansion	Provider contracts		\$	0.63 BH	Provider organizations	Funding is sufficient to support an additional 120 individuals who have a need for community-based services in licensed residential settings that have addition staffing and training to address their needs of long-term services and supports
···•8····· •••F••••)					÷			Funding is sufficient to phase in an additional 185 individuals who have a need for community-based services in licensed residential settings that have addition
Program Capacity	Transitions from Hospitals to Geriatric/Dementia Providers	State incentive programs	Provider contracts		\$	1.57 LTC	Provider organizations	staffing and training to address their needs for long-term services and supports.
								Funding is sufficient to phase in placements for 20 individuals who are ineligible for Medicaid due to citizenship status at an average daily rate of \$225 per-cli
Program Capacity	Transitions from Hospitals for Non-Citizens	Provider grants for capacity expansion	Provider contracts		\$	1.07 LTC	Provider organizations	per-day
								DSHS plans to phase in 300 subsidized housing opportunities at an average subsidy of \$775 per month to support individuals who otherwise would not be able
Housing	Rental Subsidies for Transitions from Nursing Facilities to the Community	Provider grants for capacity expansion	Provider contracts		ş	3.59 LTC	Provider organizations	transition from a skilled nursing facility. Dello video a skilled nursing facility.
Care Coordination	Discharge Planning for Conditionally Released Sexually Violent Predators	TBD	TBD		Ş	0.06 LTC	TBD	DSHS will perform discharge planning for aging and disabled civilly committed residents to develop the initial and ongoing care plans for these individuals. Funding is provided for expansion in the caseload and per-capita cost of clients with intellectual and developmental disabilities receiving Preadmission Screen
Care Coordination	PASRR Expansion	Provider grants for capacity expansion	Provider contracts		s	0.45 I/DD	Provider organizations	and Resident Review (PASRR) services. T
		0			,			Ongoing funding is provided to support four peer mentors, one for each Residential Habilitation Center, to help transition residents from state facilities to hon
Program Capacity	Peer Mentors in State-Run Residential Habilitation Centers	Provider grants for capacity expansion	State-administered program		\$	0.04 I/DD	Governmental agency	the community
								DSHS is making rules to change the way that in-home clients' assessed care hours are determined. Funding is provided for an anticipated increase in in-home
Program Capacity	Shared Benefit Adjustments to Expand Personal Care Hours	Expansion of existing services	State-administered program		\$	30.07 LTC	Provider organizations	personal care hours.
					<u>,</u>	6.05 J.T.		Funding is provided to implement new items identified in the 2021-23 CBA reached between the Governor and Service Employees International Union (SEIU)
Workforce	Funding Improved Pay/Benefits in Collective Bargaining - Individual Providers	Expansion of existing services	Rate enhancements		\$	6.06 LTC	Provider organizations	the official bargaining representative for individual providers. Funding is provided to implement new items identified in the 2021-23 CBA reached between the Governor and Service Employees International Union (SEIU)
Workforce	Funding Improved Pay/Benefits in Collective Bargaining - Individual Providers	Expansion of existing services	Rate enhancements		Ś	2.21 I/DD	Provider organizations	For any provided to implement new reins relation in the 2021/23 GA reached between the Overnor and Service Employees international Onion (SER) the official bargaining representative for individual providers.
Program Capacity	Expansion of Waiver Capacity	Supplemental funding for waiver programs	State-administered program		\$	15.53 I/DD	Provider organizations	Expands five existing HCBS waivers by a total of 1,652 slots.
								Funding is provided to implement new items identified in the 2021-23 collective bargaining agreement (CBA) reached between the Governor and the Adult Fa
	Funding Improved Pay/Benefits in Collective Bargaining - Adult Family Homes	Expansion of existing services	Rate enhancements		\$	2.94 I/DD	Provider organizations	Home (AFH) Council. Among other provisions, the CBA increases the hourly wage component of the AFH rate by 3 percent.
	High School Transition Students	Expansion of existing services	State-administered program		\$	0.56 I/DD children	Provider organizations	Capacity expansion of the Basic Plus waiver will support individuals exiting high school transition programs to have long-term employment supports.
	Temporary Rate Increases	Expansion of existing services	Rate enhancements		Ş	61.61 LTC 34.12 I/DD	Provider organizations	One-time funding is provided to continue the COVID-19 rate enhancements in effect as of June 2021 to contracted providers through December 2021. One-time funding is provided to continue the COVID-19 rate enhancements in effect as of June 2021 to contracted providers through December 2021.
	Temporary Rate Increases	Expansion of existing services	Expansion of existing services		\$	34.12 1/00	Provider organizations	
						1.50 LTC	Brouidor organizations	Increase the following rates: 1) Specialty dementia rate add-on; 2) enhanced community residential rate for I/DD and other providers; 3) Consumer-directed and the provider specific provider for the provider specific provider spe
Program Capacity	Other Enhanced Rates	Expansion of existing services	Expansion of existing services		S			
Program Capacity	Other Enhanced Rates	Expansion of existing services	Expansion of existing services		Ş	1.50 LIC	Provider organizations	employer vendor rate; 4) assisted living facility rates. Increase the following rates: 1) Specialty dementia rate add-on; 2) enhanced community residential rate for I/DD and other providers; 3) Consumer-directed
Program Capacity Program Capacity		Expansion of existing services Expansion of existing services	Expansion of existing services Expansion of existing services		\$\$	1.86 I/DD	Provider organizations	employer venuor rate; 4) assisted invig rates. Increase the following rates: 1) Speciality dementia rate add-on; 2) enhanced community residential rate for I/DD and other providers; 3) Consumer-directed employer vendor rate; 4) assisted living facility rates.
Program Capacity Program Capacity	Other Enhanced Rates Other Enhanced Rates				\$			Increase the following rates: 1) Specialty dementia rate add-on; 2) enhanced community residential rate for I/DD and other providers; 3) Consumer-directed

								One time funding is provided for durable medical equipment and minor home represtions peopled to improve mehility and associability of leng term convices and
	ogram Capacity	HCBS Supports	Provider grants for capacity expansion	Provider contracts	\$	0.81 I/DD	Provider organizations	One-time funding is provided for durable medical equipment and minor home renovations needed to improve mobility and accessibility of long-term services and supports clients.
WA Progr		I/DD Summer Programs	Provider grants for capacity expansion	Provider contracts	c	1.85 I/DD children	Provider organizations	Funding is provided for summer programs for those with intellectual and development disabilities. Funding for summer programs strengthens HCBS by supporting school age youth receiving Medicaid residential services up to age 21 with activities when the school services are not available.
NA Hogi	ogram capacity	1/00 Summer Hograms	riovider grants for capacity expansion	Howder contracts	<u>,</u>	1.85 1700 children	Howder organizations	Funding is provided for efforts to support individuals with dementia and their families, including two Dementia Resource Catalyst staff positions at the Area
WA Intra	ragovernmental	Dementia Action Collaborative	Expansion of existing services	State-administered program	\$	0.56 LTC	Provider organizations	Agencies on Aging (AAAs), with one staff position east of the Cascades and one west of the Cascades, and for direct supportive services.
								One-time funding is provided for DSHS to contract with an association representing long-term care facilities to develop and provide fall prevention training for long
		Fall Prevention Training	Subsidized training	Provider contracts	\$	0.05 LTC	Provider organizations	term care facilities
		PCAP Expansion and Rate Enhancement	Expansion of existing services	Provider contracts	\$	0.54 BH, maternal	Provider organizations	Expansion of services and rate enhancement of 2% for the Parent Child Assistance Program, for pregnant and parenting women with substance use disorders.
WA Work	orkforce	Caregiver/Provider Training	Subsidized training	TBD	<u> </u>	0.23 LTC, I/DD	Provider organizations	One-time funding is provided to invest in additional training for Medicaid caregivers and developmental disabilities providers.
WA Work	orkforce	Funding PTO for Individual Providers	Provider grants for workforce investment	Provider contracts	¢	9.29 LTC, I/DD	Provider organizations	Funding for an accrued, but unpaid, obligation for earned PTO is paid to the new Consumer Directed Employer (CDE) entity that will employ individual provider home care workers within the year. T
	binoice		riouder grants for workforce investment	Howder contracts		5.25 ETC, 1700	Howder organizations	none care workers within the year Funding is provided to phase-in five, three-bed community-based, State-Operated Living Alternatives (SOLA) homes; 12 beds in supported living settings; and four
								beds in Adult Family Homes in order to expand community placement options for individuals with intellectual and developmental disabilities by the end of June
WA Intra	ragovernmental	State-Operated Community Residential Options	Provider grants for capacity expansion	State-administered program	\$	1.00 I/DD	Governmental agency	2023.
								Funding and staffing are provided for four new community-based State-Operated Living Alternative (SOLA) homes to serve a total of 12 children and youth with
WA Intra	ragovernmental	Children's State-Operated Living Alternatives	Provider grants for capacity expansion	State-administered program	\$	0.89 I/DD children	Governmental agency	developmental disabilities age 20 and younger.
								unding is provided for DSHS to purchase an estimated 4,394 devices that may be distributed to clients with developmental disabilities and their contracted
		Remote Technology Support for People with I/DD	Provider grants for capacity expansion	Provider contracts Provider contracts	\$	1.14 I/DD 0.11 I/DD	Device suppliers	providers.
WA Progr	ogram capacity	Transitioning I/DD Employees from Subminimum Wage	Provider grants for capacity expansion	Provider contracts	\$	0.11 1/00	Provider organizations	Transitioning individuals with I/DD from subminimum wage jobs to minimum wage or better jobs. A general community services investment for those with intellectual and developmental disabilities to help with HCBS needs. By state law, funding in this account
WA Prog	ogram Canacity	Family Support and Employment/Day Services for I/DD	Expansion of existing services	Provider contracts	s	50.00 I/DD	Provider organizations	A general community services measurement or those with interfectual and developmental usadimites to help with rubs release by state law, funding in this account may only be used for supports and services in a community setting to benefit eligible persons with developmental disabilities
	-8	······································			÷			One-time funding is provided to offset cost impacts associated with COVID-19 on the in-home Medicaid long-term services and supports case management
WA Intra	ragovernmental	Case Management Funding for Area Agencies on Aging	Expansion of existing services	State-administered program	\$	3.06 LTC	Governmental agency	program operated by Washington's 13 Area Agencies on Aging.
WA Progr	ogram Capacity	Developmental Disability Services	TBD	TBD	\$	0.12 I/DD	TBD	N/A
								Funding is provided to develop and provide housing for individuals with intellectual and developmental disabilities through the Housing Trust Fund program. The
WA Hous		Housing Trust Fund for People with I/DD	TBD	TBD	\$	10.00 I/DD	TBD	source of the funds is General Fund-State savings due to the enhanced Federal Medicaid Assistance Percentages provided through ARPA.
WA Progr	ogram Capacity	Home Health Social Worker	Expansion of existing services	TBD	Ş	0.23 LTC	TBD	Funding is provided for a social worker as part of the medical assistance home health benefit.
		CUD Consilie Novientere	Descrides anote for workform investment	Den idea anatomita	<u>,</u>	0.27 Substance abura	Descides and sizekings	This will include a series of online train-the-trainer events for identified peers and organizations, follow-up coaching, and technical assistance as participants mov
WA WOR	orkforce	SUD Family Navigators	Provider grants for workforce investment	Provider contracts	>	0.37 Substance abuse	Provider organizations	toward mastery of the content. We expect to host four cohorts this biennium. Grants will be awarded to fire departments to implement safe station pilot programs. Programs may combine the safe station approach with fire department
WA Progr	ogram Capacity	Safe Station Pilots	Pilot program	Provider contracts	s	0.10 Substance abuse	Governmental agency	mobile integrated health programs such as the community assistance referral and education services program
								One-time funding is provided to expand substance use disorder services and supports including amounts for prevention, outreach, treatment, recovery supports, ar
WA Prog	ogram Capacity	Expanding SUD Treatment Capacity	Provider grants for capacity expansion	Provider contracts	\$	2.43 Substance abuse	Provider organizations; governmental agency	grants to tribes.
WA Work	orkforce	BH Rate Enhancements for Workforce	Provider grants for workforce investment	MCO/plan-administered funding	\$	4.81 BH	Plans; provider organizations	Funding is provided to invest in workforce supports through a 2 percent increase to Medicaid reimbursement for community behavioral health providers contracted
			21.1		<u>,</u>		B. 11	
WA Progr	ogram Capacity	Rural Behavioral Health Pilot	Pilot program	Provider contracts	\$	0.18 BH; children	Provider organizations; governmental agency	Funding is provided for a one-time grant to Island County to fund a pilot program to improve behavioral health outcomes for young people in rural communities.
WA Progr	ogram Canacity	Competency Evaluation and Restoration Services for People in Jails	Provider grants for capacity expansion	Provider contracts	¢	2.36 Justice system	Provider organizations; governmental agency	The second phase will include King County. The agreement outlines projects to implement outpatient competency restoration programs, residential supports and case management services.
	-8		·······		÷			Funding is provided to implement changes to assessment and diagnosis of children birth to 5 years old, including provision of up to five sessions for intake and
WA Prog	ogram Capacity	Child Assessment & Diagnosis	Expansion of existing services	Provider contracts	\$	0.05 I/DD children	Provider organizations	assessment in their home or other natural setting.
								Ongoing funding is provided for the state to contract for a community-based 12-bed CLIP specializing in the provision of habilitative mental health services for
WA Progr	ogram Capacity	12-bed Children's Long-Term Inpatient Program	Provider grants for capacity expansion	Provider contracts	\$	0.20 I/DD children	Provider organizations	children and youth with intellectual or developmental disabilities who have intensive behavioral health support needs. T
								Ongoing funding is provided for this HCBS program for short-term and long-term rental subsidies and recovery housing for individuals with mental health or
WA Hour	using	Rental Subsidies for People with BH Needs	Provider grants for capacity expansion	Provider contracts	¢	1.52 BH	Provider organizations	substance use disorders. Short-term subsidies are used to bridge individuals exiting inpatient behavioral health settings until long-term housing subsidies can be obtained.
1003	451115	Renal Subsidies for Federal Martin Receds	Trovidel granes for capacity expansion			1.52 511		
								Funding is provided for increasing local behavioral bealth mobile crisis response team canacity and ensuring each region has at least one adult and one children ar
WA Progr	ogram Capacity	Mobile Crisis Teams for Adults and Youth	Provider grants for capacity expansion	Provider contracts	s	6.52 BH	Provider organizations	Funding is provided for increasing local behavioral health mobile crisis response team capacity and ensuring each region has at least one adult and one children ar youth mobile crisis team that is able to respond to calls coming into the 988-crisis hotline
		Mobile Crisis Teams for Adults and Youth MCO Wraparound Services	Provider grants for capacity expansion Provider grants for capacity expansion	Provider contracts MCO/plan-administered funding	\$	6.52 BH 0.16 General	Provider organizations Plans; provider organizations	
WA Progr	ogram Capacity	MCO Wraparound Services			\$ \$			youth mobile crisis team that is able to respond to calls coming into the 988-crisis hotline
WA Progr	ogram Capacity				\$ \$ \$			youth mobile crisis team that is able to respond to calls coming into the 988-crisis hotline Funding is provided for Medicaid MCOs to increase provider rates by 2 percent for non-Medicaid wraparound services effective July 2021. Funding is provided for a pilot project to provide mobile integrated health services for residents who cannot navigate behavioral health and primary care resources through typical methods through brief therapeutic intervention, biopsychosocial assessment, and referral, and community care coordination.
WA Progr	ogram Capacity	MCO Wraparound Services	Provider grants for capacity expansion	MCO/plan-administered funding	\$ \$ \$	0.16 General	Plans; provider organizations	youth mobile crisis team that is able to respond to calls coming into the 988-crisis hotline Funding is provided for Medicaid MCOs to increase provider rates by 2 percent for non-Medicaid wraparound services effective July 2021. Funding is provided for a pilot project to provide mobile integrated health services for residents who cannot navigate behavioral health and primary care resources through typical methods through brief therapeutic intervention, biopsychosocial assessment, and referral, and community care coordination. The program will provide community case management services to non-Medicaid and Medicaid eligible individuals. The state will contract with BHASOs to
WA Progr WA Progr	ogram Capacity ogram Capacity	MCO Wraparound Services Mobile Integrated Health Pilot	Provider grants for capacity expansion Pilot program	MCO/plan-administered funding Provider contracts	\$ \$ \$	0.16 General 0.18 BH	Plans; provider organizations Provider organizations	youth mobile crisis team that is able to respond to calls coming into the 988-crisis hotline Funding is provided for Medicaid MCOs to increase provider rates by 2 percent for non-Medicaid wraparound services effective July 2021. Funding is provided for a pilot project to provide mobile integrated health services for residents who cannot navigate behavioral health and primary care resources through typical methods through brief therapeutic intervention, biopsychosocial assessment, and referral, and community care coordination. The program will provide community case management services to non-Medicaid and Medicaid eligible individuals. The state will contract with BHASOs to implement statewide recovery navigator programs, which provide HCBS community-based outreach and case management services based on the Law Enforcement
WA Progr WA Progr	ogram Capacity ogram Capacity	MCO Wraparound Services	Provider grants for capacity expansion	MCO/plan-administered funding	\$ \$ \$ \$	0.16 General	Plans; provider organizations	youth mobile crisis team that is able to respond to calls coming into the 988-crisis hotline Funding is provided for Medicaid MCOs to increase provider rates by 2 percent for non-Medicaid wraparound services effective July 2021. Funding is provided for a polic project to provide mobile integrated health services for residents who cannot navigate behavioral health and primary care resources through typical methods through brief therapeutic intervention, biopsychosocial assessment, and referral, and community care coordination. The program will provide community case management services to non-Medicaid and Medicaid eligible individuals. The state will contract with BHASOs to implement statewide recovery navigator programs, which provide HCBS community-based outreach and case management services based on the Law Enforcement Assisted Diversion (LEAD) model.
WA Progr WA Progr WA Progr	ogram Capacity ogram Capacity ogram Capacity	MCD Wraparound Services Mobile Integrated Health Pilot Outreach/Intensive Care Management for People with BH Needs	Provider grants for capacity expansion Pilot program Provider grants for capacity expansion	MCO/plan-administered funding Provider contracts MCO/plan-administered funding	\$ \$ \$ \$	0.16 General 0.18 BH	Plans; provider organizations Provider organizations Plans; downstream provider organizations	youth mobile crisis team that is able to respond to calls coming into the 988-crisis hotline Funding is provided for Medicaid MCOs to increase provider rates by 2 percent for non-Medicaid wraparound services effective July 2021. Funding is provided for a pilot project to provide mobile integrated health services for residents who cannot navigate behavioral health and primary care resources through typical methods through brief therapeutic intervention, biopsychosocial assessment, and referral, and community care coordination. The program will provide community care management services to non-Medicaid and Medicaid eligible individuals. The state will contract with BHASOs to implement statewide recovery navigator programs, which provide HCBS community-based outreach and case management services based on the Law Enforcement Assisted Diversion (LEAD) model. These funds support investments made in a new state law. Short-term subsidies are used to bridge individuals exiting inpatient behavioral health settings until lor the statewide in the statewide in a new state law. Short-term subsidies are used to bridge individuals exiting inpatient behavioral health settings until lor
WA Progr WA Progr	ogram Capacity ogram Capacity ogram Capacity	MCO Wraparound Services Mobile Integrated Health Pilot	Provider grants for capacity expansion Pilot program	MCO/plan-administered funding Provider contracts	\$ \$ \$ \$ \$	0.16 General 0.18 BH 4.88 BH	Plans; provider organizations Provider organizations	youth mobile crisis team that is able to respond to calls coming into the 988-crisis hotline Funding is provided for Medicaid MCOs to increase provider rates by 2 percent for non-Medicaid wraparound services effective July 2021. Funding is provided for a polic project to provide mobile integrated health services for residents who cannot navigate behavioral health and primary care resources through typical methods through brief therapeutic intervention, biopsychosocial assessment, and referral, and community care coordination. The program will provide community case management services to non-Medicaid and Medicaid eligible individuals. The state will contract with BHASOs to implement statewide recovery navigator programs, which provide HCBS community-based outreach and case management services based on the Law Enforcement Assisted Diversion (LEAD) model.
WA Progr WA Progr WA Progr	ogram Capacity ogram Capacity ogram Capacity	MCD Wraparound Services Mobile Integrated Health Pilot Outreach/Intensive Care Management for People with BH Needs	Provider grants for capacity expansion Pilot program Provider grants for capacity expansion	MCO/plan-administered funding Provider contracts MCO/plan-administered funding	\$ \$ \$ \$ \$	0.16 General 0.18 BH 4.88 BH	Plans; provider organizations Provider organizations Plans; downstream provider organizations	youth mobile crisis team that is able to respond to calls coming into the 988-crisis hotline Funding is provided for Medicaid MCOs to increase provider rates by 2 percent for non-Medicaid wraparound services effective July 2021. Funding is provided for a policy troject to provide mobile integrated health services for residents who cannot navigate behavioral health and primary care resources through typical methods through brief therapeutic intervention, biopsychosocial assessment, and referral, and community care coordination. The program will provide community case management services to non-Medicaid and Medicaid eligible individuals. The state will contract with BHASOs to implement statewide recovery navigator programs, which provide HCBS community-based outreach and case management services based on the Law Enforcement Assisted Diversion (LEAD) model. These funds support investments made in a new state law. Short-term subsidies are used to bridge individuals exiting inpatient behavioral health settings until low term housing subsidies can be obtained.
WA Progr WA Progr WA Progr WA Hous	ogram Capacity ogram Capacity ogram Capacity using	MCD Wraparound Services Mobile Integrated Health Pilot Outreach/Intensive Care Management for People with BH Needs	Provider grants for capacity expansion Pilot program Provider grants for capacity expansion	MCO/plan-administered funding Provider contracts MCO/plan-administered funding	\$ \$ \$ \$ \$ \$	0.16 General 0.18 BH 4.88 BH	Plans; provider organizations Provider organizations Plans; downstream provider organizations	youth mobile crisis team that is able to respond to calls coming into the 988-crisis hotline Funding is provided for Medicaid MCOs to increase provider rates by 2 percent for non-Medicaid wraparound services effective July 2021. Funding is provided for a pilot project to provide mobile integrated health services for residents who cannot navigate behavioral health and primary care resources through typical methods through brief therapeutic intervention, biopsychosocial assessment, and referral, and community care coordination. The program will provide community case management services to non-Medicaid and Medicaid eligible individuals. The state will contract with BHASOs to implement statewide recovery navigator programs, which provide HCBS community-based outreach and case management services based on the Law Enforcement Assisted Diversion (LEAD) model. These funds support investments made in a new state law. Short-term subsidies are used to bridge individuals exiting inpatient behavioral health settings until lo term housing subsidies can be obtained. These funds support investments made in a new state law. Washington is required to: Create and maintian a registry of approved recovery residences in Washington; Contract with the state affiliate of the National Association for Recovery Residences to provide technical assistance to residence operators; and Establish and manage an operating and a capital revolving loan fund to provide funds to recovery residence poreators.
WA Progr WA Progr WA Progr WA Hous WA Intra	ogram Capacity ogram Capacity ogram Capacity using ragovernmental	MCD Wraparound Services Mobile Integrated Health Pilot Outreach/Intensive Care Management for People with BH Needs Short-Term SUD Housing Vouchers Recovery Residence Support Activities	Provider grants for capacity expansion Pilot program Provider grants for capacity expansion Provider grants for capacity expansion HIT investment	MCO/plan-administered funding Provider contracts MCO/plan-administered funding Provider contracts State-administered program	\$ \$ \$ \$ \$ \$	0.16 General 0.18 BH 4.88 BH 0.24 Substance abuse 0.04 Substance abuse	Plans; provider organizations Provider organizations Plans; downstream provider organizations Provider organizations Governmental agency	youth mobile crisis team that is able to respond to calls coming into the 988-crisis hotline Funding is provided for Medicaid MCOs to increase provider rates by 2 percent for non-Medicaid wraparound services effective July 2021. Funding is provided for a pilot project to provide mobile integrated health services for residents who cannot navigate behavioral health and primary care resources through typical methods through brief therapeutic intervention, biopsychosocial assessment, and referral, and community care coordination. The program will provide community cares management services to non-Medicaid and Medicaid eligible individuals. The state will contract with BHASOs to implement statewide recovery navigator programs, which provide HCBS community-based outreach and case management services based on the Law Enforcement Assisted Diversion (LEAD) model. These funds support investments made in a new state law. Short-term subsidies are used to bridge individuals exiting inpatient behavioral health settings until lor term housing subsidies can be obtained. These funds support investments made in a new state law. Washington is required to: Create and maintain a registry of approved recovery residences in Washington; Contract with the state affiliate of the National Association for Recovery Residences to provide technical assistance to residence operators; and Establish and manage an operating and a capital revolving loan fund to provide funds to recovery residence operators; and Establish support investments made in a new state law. Clubhouse programs benefit individuals in mental health recovery. Based on the core principles of peter These funds support investments made in a new state law. Clubhouse programs benefit individuals in mental health recovery. Based on the core principles of peter
WA Progr WA Progr WA Progr WA Hous WA Intra	ogram Capacity ogram Capacity ogram Capacity using ragovernmental	MCD Wraparound Services Mobile Integrated Health Pilot Outreach/Intensive Care Management for People with BH Needs Short-Term SUD Housing Vouchers	Provider grants for capacity expansion Pilot program Provider grants for capacity expansion Provider grants for capacity expansion	MCO/plan-administered funding Provider contracts MCO/plan-administered funding Provider contracts	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.16 General 0.18 BH 4.88 BH 0.24 Substance abuse	Plans; provider organizations Provider organizations Plans; downstream provider organizations Provider organizations	youth mobile crisis team that is able to respond to calls coming into the 988-crisis houtine Funding is provided for a pilot project to provide mobile integrated health services for residents who cannot navigate behavioral health and primary care resources through typical methods through brief therapeutic intervention, biopsychosocial assessment, and referral, and community care coordination. The program will provide community case management services to non-Medicaid end Medicaid eligible individuals. The state will contract with BHASOs to implement statewide recovery navigator programs, which provide HCBS community-based outreach and case management services based on the Law Enforcement Assisted Diversion (LEAD) model. These funds support investments made in a new state law. Short-term subsidies are used to bridge individuals exiting inpatient behavioral health settings until loo term housing subsidies can be obtained. These funds support investments made in a new state law. Short-term subsidies are used to bridge individuals exiting inpatient behavioral health settings until loo term housing subsidies can be obtained. These funds support investments made in a new state law. Short-term subsidies are used to bridge individuals exiting inpatient behavioral health settings until loo term housing subsidies can be obtained. These funds support investments made in a new state law. Washington is required to: Create and maintain a registry of approved recovery residences in Washington; Contract with the state affiliate of the National Association for Recovery Residences to provide technical assistance to residence operators; and Establish and manage an operating and a capital revolving loan fund to provide funds to recovery residence operators. These funds support investments made in a new state law. Clubhouse programs benefit individuals in mental health recovery. Based on the core principles of peer support, self-empowerment, and functionality within a community setting.
WA Progr WA Progr WA Progr WA Hous WA Intra	ogram Capacity ogram Capacity ogram Capacity using ragovernmental	MCD Wraparound Services Mobile Integrated Health Pilot Outreach/Intensive Care Management for People with BH Needs Short-Term SUD Housing Vouchers Recovery Residence Support Activities	Provider grants for capacity expansion Pilot program Provider grants for capacity expansion Provider grants for capacity expansion HIT investment	MCO/plan-administered funding Provider contracts MCO/plan-administered funding Provider contracts State-administered program	<u>\$</u> \$ \$ \$ \$ \$ \$ \$	0.16 General 0.18 BH 4.88 BH 0.24 Substance abuse 0.04 Substance abuse	Plans; provider organizations Provider organizations Plans; downstream provider organizations Provider organizations Governmental agency	youth mobile crisis team that is able to respond to calls coming into the 988-crisis hotline Funding is provided for a Medicaid MCOs to increase provider rates by 2 percent for non-Medicaid wraparound services effective July 2021. Funding is provided for a policy troject to provide mobile integrated health services for residents who cannot navigate behavioral health and primary care resources through typical methods through brief therapeutic intervention, biopsychosocial assessment, and referral, and community care coordination. The program will provide community case management services to non-Medicaid and Medicaid eligible individuals. The state will contract with BHASOs to implement statewide recovery navigator programs, which provide HCBS community-based outreach and case management services based on the Law Enforcement Assisted Diversion (LEAD) model. These funds support investments made in a new state law. Short-term subsidies are used to bridge individuals exiting inpatient behavioral health settings until lo term housing subsidies can be obtained. These funds support investments made in a new state law. Washington is required to: Create and maintian a registry of approved recovery residences in Washington; Contract with the state affiliate of the National Association for Recovery Residences to provide technical assistance to residence operators; and Establis hand manage an operating and a capital revolving loan fund to provide funds to recovery residence operators. These funds support investments made in a new state law. Clubhouse programs benefit individuals in mental health recovery. Based on the core principles of peer support, self-empowerment, and functionality within a community setting. These funds support investments made in a new state law. The bill includes an appropriation to implement homeless outreach stabilization teams (HOST)
WA Progr WA Progr WA Progr WA Hous WA Intra	ogram Capacity ogram Capacity ogram Capacity using ragovernmental	MCD Wraparound Services Mobile Integrated Health Pilot Outreach/Intensive Care Management for People with BH Needs Short-Term SUD Housing Vouchers Recovery Residence Support Activities	Provider grants for capacity expansion Pilot program Provider grants for capacity expansion Provider grants for capacity expansion HIT investment	MCO/plan-administered funding Provider contracts MCO/plan-administered funding Provider contracts State-administered program	\$ \$ \$ \$ \$ \$ \$ \$	0.16 General 0.18 BH 4.88 BH 0.24 Substance abuse 0.04 Substance abuse	Plans; provider organizations Provider organizations Plans; downstream provider organizations Provider organizations Governmental agency	youth mobile crisis team that is able to respond to calls coming into the 988-crisis houtine Funding is provided for Medicaid MCOs to increase provider rates by 2 percent for non-Medicaid wraparound services effective July 2021. Funding is provided for a pilot project to provide mobile integrated health services for residents who cannot navigate behavioral health and primary care resources through typical methods through brief therapeutic intervention, biopsychosocial assessment, and referral, and community care coordination. The program will provide community care management services to non-Medicaid and Medicaid eligible individuals. The state will contract with BHASOs to implement statewide recovery navigator programs, which provide HCBS community-based outreach and case management services based on the Law Enforcement Assisted Diversion (LEAD) model. These funds support investments made in a new state law. Short-term subsidies are used to bridge individuals exiting inpatient behavioral health settings until lot term housing subsidies can be obtained. These funds support investments made in a new state law. Washington is required to: Create and maintain a registry of approved recovery residences in Washington, Contract with the state affiliate of the National Association for Recovery Residences to provide technical assistance to residence operators, and Establish and manage an operating and a capital revolving loan fund to provide funds to recovery residence operators. These funds support investments made in a new state law. Clubhouse programs benefit individuals in mental health recovery. Based on the core principles of peet support, self-empowerment, and functionality within a community setting. These funds support investments made in a new state law. The bill includes an appropriation to implement homeless outreach stabilization teams (HOST) consisting of mental health, substance use disorder, and medical professionals. This multi-disciplinary team provides treatment to individuals who are e
WA Progr WA Progr WA Progr WA Hous WA Intraj WA Progr	ogram Capacity ogram Capacity ogram Capacity using ragovernmental ogram Capacity	MCD Wraparound Services Mobile Integrated Health Pilot Outreach/Intensive Care Management for People with BH Needs Short-Term SUD Housing Vouchers Recovery Residence Support Activities	Provider grants for capacity expansion Pilot program Provider grants for capacity expansion Provider grants for capacity expansion HIT investment	MCO/plan-administered funding Provider contracts MCO/plan-administered funding Provider contracts State-administered program	\$ \$ \$ \$ \$ \$ \$ \$ \$	0.16 General 0.18 BH 4.88 BH 0.24 Substance abuse 0.04 Substance abuse	Plans; provider organizations Provider organizations Plans; downstream provider organizations Provider organizations Governmental agency	youth mobile crisis team that is able to respond to calls coming into the 988-crisis hotline Funding is provided for a Medicaid MCOs to increase provider rates by 2 percent for non-Medicaid wraparound services effective July 2021. Funding is provided for a policy troject to provide mobile integrated health services for residents who cannot navigate behavioral health and primary care resources through typical methods through brief therapeutic intervention, biopsychosocial assessment, and referral, and community care coordination. The program will provide community case management services to non-Medicaid and Medicaid eligible individuals. The state will contract with BHASOs to implement statewide recovery navigator programs, which provide HCBS community-based outreach and case management services based on the Law Enforcement Assisted Diversion (LEAD) model. These funds support investments made in a new state law. Short-term subsidies are used to bridge individuals exiting inpatient behavioral health settings until lo term housing subsidies can be obtained. These funds support investments made in a new state law. Washington is required to: Create and maintian a registry of approved recovery residences in Washington; Contract with the state affiliate of the National Association for Recovery Residences to provide technical assistance to residence operators; and Establis hand manage an operating and a capital revolving loan fund to provide funds to recovery residence operators. These funds support investments made in a new state law. Clubhouse programs benefit individuals in mental health recovery. Based on the core principles of peer support, self-empowerment, and functionality within a community setting. These funds support investments made in a new state law. The bill includes an appropriation to implement homeless outreach stabilization teams (HOST)
WA Progr WA Progr WA Progr WA Hous WA Intraj WA Progr	ogram Capacity ogram Capacity ogram Capacity using ragovernmental ogram Capacity	MCO Wraparound Services Mobile Integrated Health Pilot Outreach/Intensive Care Management for People with BH Needs Short-Term SUD Housing Vouchers Recovery Residence Support Activities Clubhouse Expansion	Provider grants for capacity expansion Pilot program Provider grants for capacity expansion Provider grants for capacity expansion HiT investment Provider grants for capacity expansion	MCO/plan-administered funding Provider contracts MCO/plan-administered funding Provider contracts State-administered program Provider contracts	\$ \$ \$ \$ \$ \$ \$ \$ \$	0.16 General 0.18 BH 4.88 BH 0.24 Substance abuse 0.04 Substance abuse 0.82 BH	Plans; provider organizations Provider organizations Plans; downstream provider organizations Provider organizations Governmental agency Provider organizations	 youth mobile crisis team that is able to respond to calls coming into the 988-crisis houtine Funding is provided for Medicaid MCOs to increase provider rates by 2 percent for non-Medicaid wraparound services effective July 2021. Funding is provided for a pilot project to provide mobile integrated health services for residents who cannot navigate behavioral health and primary care resources through brief therapeutic intervention, biopsychosocial assessment, and referral, and community care coordination. The program will provide to row anagement services to non-Medicaid and Medicaid eligible individuals. The state will contract with BHASOs to implement statewide recovery navigator programs, which provide HCBS community-based outreach and case management services based on the Law Enforcement Assisted Diversion (LFAD) model. These funds support investments made in a new state law. Short-term subsidies are used to bridge individuals exiting inpatient behavioral health settings until low term housing subsidies can be obtained. These funds support investments made in a new state law. Washington is required to: Create and maintain a registry of approved recovery residences in Washington, Contract with the state affiliate of the National Association for Recovery Residences to provide technical assistance to residence operators; and Establish and manage an operating and a capital revolving loan fund to provide funds to recovery residence operators. These funds support investments made in a new state law. Clubhouse programs benefit individuals in mental health recovery. Based on the core principles of peer support, self-empowerment, and functionality within a community setting. These funds support investments made in a new state law. Clubhouse programs benefit individuals in mental health recovery. Based on the core principles of peer support, self-empowerment, and functionality within a community setting.

Categories are approximate and some initiatives are overlapping. SPG has assigned categories with the following definitions in mind:
 - Care Coordination: Initiatives to expand system navigation, access to services, and/or care coordination programs for HCBS.
 - Care Protocols: Development or implementation of new clinical/service protocols for HCBS services.
 - Data and HTI: Institutes the structure of HCBS provides.
 - Data and HTI: Institutes that charding and/or data inflatoritute for HCBS providers.
 - Delivery System: Initiatives for broader transformation of the delivery system.
 - Housing: Fund delicated explicitly to housing.
 - Intragovernmental: Funds delicated to avaid in thitatives entirely within the state or local government.
 - Program Capacity, Initiatives to support the capacity (counter, scope, or type) of HCBS services available to recipients, including pilot programs.
 - Workforce: Initiatives to support training or enhanced pay for HCBS workers.

A number of states have repared information on their spending plans but without specific allocations. For example:
 MD: At least 75% of funds will be used for a one-time rate increase to community providers. Remaining funds may be used only for waiver slot expansion and other efforts to expand HCBS.
 VA: Disbursements are subject to legislative approval in a special session. VA has identified four general spending areas (access and capacity building; care coordination and quality efforts; technology and infrastructure; and workforce development) and a targeted amount totaling \$634 million over three years.

State plans are available here:
 Ot: https://www.hca.wa.gov/assets/WA-State-ARPA-spending-plan.pdf
 MA: https://www.mass.gov/doc/summary-of-massachusetts-arpa-hcbs-initial-spending-plan-june-2021-0/download
 Anthrps://www.hca.wa.gov/assets/WA-State-ARPA-spending-plan.pdf
 WA: https://www.hca.wa.gov/assets/WA-State-ARPA-spending-plan.pdf