FINAL BILL REPORT 2SHB 1095

C3L07

Synopsis as Enacted

Brief Description: Implementing the part D drug copayment program.

Sponsors: By House Committee on Appropriations (originally sponsored by Representatives Barlow, Hinkle, Appleton, Green, Ormsby, Schual-Berke, Cody, Blake, B. Sullivan, Hurst, O'Brien, Clibborn, Morrell, Conway, Kenney, Linville, Rolfes, Moeller and Dunn; by request of Governor Gregoire).

House Committee on Health Care & Wellness House Committee on Appropriations Senate Committee on EnterCommittee

Background:

Congress passed, and the President signed, the Medicare Prescription Drug, Improvement, and Modernization Act in December 2003. It required that as of January 1, 2006, individuals who are dually eligible for Medicare and Medicaid must receive their prescription drug coverage through Medicare Part D and be assessed a co-pay on each prescription they fill in an amount between \$1 and \$5. Prior to this change, these individuals received their prescription drug coverage through the Medicaid program and did not make any co-pay. There are approximately 100,000 individuals who are dually eligible for Medicare and Medicaid. The Governor's 2007-09 biennial budget submittal assumes approximately \$26 million General Fund-State will be expended to provide co-payment coverage for the dual eligible population.

Summary:

The Department of Social and Health Services is authorized to offer Medicare Part D copayment coverage to individuals who are eligible for medical assistance or the medically needy program and Medicare, subject to available funds.

Votes on Final Passage:

House 92 0 Senate 43 0

Effective: July 22, 2007