FINAL BILL REPORT SSB 6583

C 317 L 08

Synopsis as Enacted

Brief Description: Changing provisions relating to eligibility for medical assistance.

Sponsors: Senate Committee on Ways & Means (originally sponsored by Senators Brandland and Hargrove).

Senate Committee on Human Services & Corrections Senate Committee on Ways & Means House Committee on Health Care & Wellness House Committee on Appropriations

Background: In the state of Washington, an individual may qualify for Medicaid coverage under the "categorically needy" (CN) program if the individual is disabled, blind, or over age 65, and meets income limitations. The Department of Social and Health Services (DSHS) has set the income limitation for the CN program at \$637 per month for one person, or \$956 per month for two persons. A person who is disabled, blind, or over age 65, and who has an income greater than \$637 per month may qualify for Medicaid under the "medically needy" (MN) program only if the person can prove that the person has spent all of his or her excess income above \$637 per month on medical expenses for the three- or six-month period prior to coverage. A person who is released from a correctional institution or institution for mental diseases is not eligible for Medicaid under the MN program if the person's medical expenses for the previous three- or six-month period were covered by the institution. DSHS may change the income limitation for the CN Medicaid program within parameters authorized by the federal government without losing federal matching funds.

The federal poverty level (FPL) refers to poverty guidelines published annually by the federal Department of Health and Human Services. These guidelines are adjusted annually to account for inflation. The FPL is currently \$851 per month for one individual or \$1,141 per month for two persons.

Summary: DSHS must raise the categorically needy income level (CNIL) for aged, blind, and disabled persons to 80 percent of the FPL as adjusted annually beginning July 1, 2009. The act takes effect July 1, 2009. DSHS must prepare a fiscal analysis of costs and cost savings associated with raising the CNIL to 80 percent of FPL and submit the report to the Legislature by November 1, 2010. Persons who become eligible for medical assistance after June 30, 2008, are not eligible for the Washington State Health Insurance Pool.

The provisions of the bill are contingent upon funding being provided in the 2009-11 biennial budget.

Votes on Final Passage:

Senate 44 0

Senate Bill Report - 1 - SSB 6583

House 92 1 (House amended) Senate 45 0 (Senate concurred)

Effective: July 1, 2009

Senate Bill Report - 2 - SSB 6583