## SENATE BILL 6793

State of Washington 60th Legislature 2008 Regular Session

By Senators Pflug and Parlette

Read first time 01/24/08. Referred to Committee on Health & Long-Term Care.

1 AN ACT Relating to developing alternative benefits packages to 2 medicaid beneficiaries; and creating new sections.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

NEW SECTION. Sec. 1. The deficit reduction act of 2005 gives 4 5 states the option, through a state plan amendment process, to provide alternative benefits packages to medicaid beneficiaries as a means of 6 7 controlling taxpayer funded health care costs and improving quality of 8 The legislature finds that the state must do more to control care. health care costs to ensure a sustainable public health care system. 9 10 The options available to the state will enable the state to leverage employer-sponsored coverage of medicaid benefits and change our 11 12 medicaid benefit package to mirror certain commercial insurance 13 packages through the use of benchmark plans. Our state medicaid package does not do enough to contain cost controls and lead to high 14 15 quality care. The goal for Washington must be to reduce the cost of health care, expand the use of affordable private coverage, promote 16 personal responsibility for health, 17 and improve quality and 18 coordination of care. Washington has not yet taken advantage of this 19 option to any real extent. The centers for medicare and medicaid would look favorably on future Washington waivers and programs if our state
 made greater efforts to control health care costs in both our medicaid
 and our state children's health insurance program.

<u>NEW SECTION.</u> Sec. 2. The department of social and health services
shall submit a medicaid state plan amendment by July 1, 2008, as
authorized under the deficit reduction act of 2005, P.L. number 109171.

8 (1) The state plan amendment shall require that all healthy adults 9 and children who are currently enrolled in medicaid be enrolled in one 10 or more commercially available plans or a health savings account with 11 a high deductible health plan that meets all coverage requirements of 12 the federal law with regard to alternative benefits packages.

(a) The state shall use medicaid funds and state funds to pay thedeductible and fund the health savings accounts.

(b) Appropriate and engaging education on how to use insurance and health savings accounts and the rights and responsibilities of the enrollee shall be available. This education and training must be available on the internet, as well as in other forms.

19 (2) The state plan amendment shall require that all children enrolled in and funded through the state children's health insurance 20 21 plan be offered a health savings account with a high deductible health 22 plan that meets all coverage requirements of the federal law with regard to alternative benefits packages. Appropriate and engaging 23 24 education on how to use health savings accounts and the rights and responsibilities of the enrollee shall be available. This education 25 26 and training must be available on the internet, as well as in other 27 forms.

(3) The state plan amendment shall provide for the voluntary enrollment of children and youth in foster care in one or more commercially available plans or a health savings account with a high deductible health plan that meets all coverage requirements of the federal law with regard to alternative benefits packages.

(a) The state shall use medicaid funds and state funds to pay the
 deductible and fund the health savings accounts while the child is in
 foster care and eligible for medicaid.

36 (b) Appropriate and engaging education on how to use insurance and 37 health savings accounts, the portability of benefits of health savings

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1 accounts, and the rights and responsibilities of the enrollee shall be 2 available. This education and training must be available on the 3 internet, as well as in other forms.

<u>NEW SECTION.</u> Sec. 3. The department of social and health services shall submit necessary changes in state law to the governor and the appropriate committees of the legislature to implement the new benefits packages specifically related to eligibility, benefits, services or delivery systems, and other areas as needed.

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