# Washington State House of Representatives Office of Program Research

## BILL ANALYSIS

# **Ways & Means Committee**

## **SSB 5912**

**Brief Description**: Expanding family planning services to two hundred fifty percent of the federal poverty level.

**Sponsors**: Senate Committee on Ways & Means (originally sponsored by Senators Keiser, Pflug, Kohl-Welles and Kline).

#### **Brief Summary of Substitute Bill**

- Requires the Department of Social and Health Services (DSHS) to submit an application for an amendment to the Medicaid Take Charge family planning waiver to expand income eligibility from 200 to 250 percent of the federal poverty level.
- Requires the Office of Financial Management to reduce State General Fund allotments for the Medical Assistance Program by \$4.5 million for the 2011-13 fiscal biennium.

Hearing Date: 5/20/11

Staff: Erik Cornellier (786-7116).

### Background:

Through the Take Charge Program, the Department of Social and Health Services (DSHS) provides family planning services to state residents with family incomes below 200 percent of the federal poverty level (FPL). Services include an annual gynecological exam and pap smear, birth control pills and devices, emergency contraception, and sterilization. Pregnancy termination is not a covered service. Services are delivered by a variety of local contractors, including county health departments, community clinics, and non-profit organizations. Approximately 60,000 people per month are enrolled in the program at an annual cost of \$21 million.

Medicaid is a federal-state program that provides health care services to specified categories of low-income individuals pursuant to federal standards. States may request waivers from federal

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requirements for experimental, pilot, or demonstration projects. Approximately 80 percent of the cost of the Take Charge Program is provided by the federal government under a Medicaid waiver.

Within available funds, the DSHS is directed to request an amendment to the Take Charge waiver to increase income eligibility from 200 to 250 percent of the FPL. The DSHS has not requested or implemented this eligibility expansion.

## **Summary of Bill**:

The DSHS must submit an application to the federal Department of Health and Human Services by September 30, 2011, requesting an expansion of eligibility for the Take Charge Program from 200 to 250 percent of the FPL. This expansion is not subject to the availability of funding.

Upon implementation of the expansion, the Office of Financial Management must reduce State General Fund allotments for the Medical Assistance Program by \$4.5 million.

**Appropriation**: None.

Fiscal Note: Available on original bill.

**Effective Date**: The bill takes effect 90 days after adjournment of the session in which the bill is passed.