
SENATE BILL 5580

State of Washington

68th Legislature

2023 Regular Session

By Senators Muzzall, Cleveland, Braun, Rivers, Warnick, Hasegawa, Kuderer, Lovelett, Randall, Shewmake, and J. Wilson

Read first time 01/26/23. Referred to Committee on Health & Long Term Care.

1 AN ACT Relating to improving maternal health outcomes; amending
2 RCW 74.09.830; and adding new sections to chapter 74.09 RCW.

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

4 NEW SECTION. **Sec. 1.** A new section is added to chapter 74.09
5 RCW to read as follows:

6 (1) By January 1, 2024, the authority shall create a postdelivery
7 and transitional care program that allows for extended postdelivery
8 hospital care for women with a substance use disorder at the time of
9 delivery. The authority shall:

10 (a) Allow for at least five additional days of hospitalization
11 stay for the birth parent;

12 (b) Provide the birth parent access to integrated care and
13 medical services including, but not limited to, access to clinical
14 health, medication management, behavioral health, addiction medicine,
15 specialty consultations, and psychiatric providers;

16 (c) Provide the birth parent access to social work support which
17 includes coordination with the department of children, youth, and
18 families to develop a plan for safe care;

19 (d) Allow dedicated time for health professionals to assist in
20 facilitating early bonding between the birth parent and infant by

1 helping the birth parent recognize and respond to their infant's
2 cues; and

3 (e) Establish provider requirements and pay only those qualified
4 providers for the services provided through the program.

5 (2) In administering the program, the authority shall seek any
6 available federal financial participation under the medical
7 assistance program, as codified at Title XIX of the federal social
8 security act, the state children's health insurance program, as
9 codified at Title XXI of the federal social security act, and any
10 other federal funding sources that are now available or may become
11 available.

12 NEW SECTION. **Sec. 2.** A new section is added to chapter 74.09
13 RCW to read as follows:

14 (1) The authority shall update the maternity support services
15 program to address perinatal outcomes and increase equity and
16 healthier birth outcomes.

17 (2) By January 1, 2024, the authority shall:

18 (a) Update current screening tools to be culturally relevant,
19 include current risk factors, ensure the tools address health equity,
20 and include questions identifying various social determinants of
21 health that impact a healthy birth outcome and improve health equity;

22 (b) Ensure care coordination, including sharing screening tools
23 with the patient's health care providers as necessary;

24 (c) Develop a mechanism to collect the results of the maternity
25 support services screenings and evaluate the outcomes of the program.

26 At minimum, the program evaluation shall:

27 (i) Identify gaps, strengths, and weaknesses of the program; and

28 (ii) Make recommendations for how the program may improve to
29 better align with the authority's maternal and infant health
30 initiatives; and

31 (d) Increase utilization of services to all eligible maternity
32 support services clients who choose to receive the services.

33 (3) The authority shall adopt rules to implement this section.

34 NEW SECTION. **Sec. 3.** A new section is added to chapter 74.09
35 RCW to read as follows:

36 The income standards for a pregnant woman eligible for Washington
37 apple health pregnancy coverage shall have countable income equal to
38 or below 210 percent of the federal poverty level.

1 **Sec. 4.** RCW 74.09.830 and 2021 c 90 s 2 are each amended to read
2 as follows:

3 (1) The authority shall extend health care coverage from 60 days
4 postpartum to one year postpartum for pregnant or postpartum persons
5 who, on or after the expiration date of the federal public health
6 emergency declaration related to COVID-19, are receiving postpartum
7 coverage provided under this chapter.

8 (2) By June 1, 2022, the authority must:

9 (a) Provide health care coverage to postpartum persons who reside
10 in Washington state, have countable income equal to or below (~~(193)~~)
11 210 percent of the federal poverty level, and are not otherwise
12 eligible under Title XIX or Title XXI of the federal social security
13 act; and

14 (b) Ensure all persons approved for pregnancy or postpartum
15 coverage at any time are continuously eligible for postpartum
16 coverage for 12 months after the pregnancy ends regardless of whether
17 they experience a change in income during the period of eligibility.

18 (3) Health care coverage under this section must be provided
19 during the 12-month period beginning on the last day of the
20 pregnancy.

21 (4) The authority shall not provide health care coverage under
22 this section to individuals who are eligible to receive health care
23 coverage under Title XIX or Title XXI of the federal social security
24 act. Health care coverage for these individuals shall be provided by
25 a program that is funded by Title XIX or Title XXI of the federal
26 social security act. Further, the authority shall make every effort
27 to expedite and complete eligibility determinations for individuals
28 who are presumptively eligible to receive health care coverage under
29 Title XIX or Title XXI of the federal social security act to ensure
30 the state is receiving the maximum federal match. This includes, but
31 is not limited to, working with the managed care organizations to
32 provide continuous outreach in various modalities until the
33 individual's eligibility determination is completed. Beginning
34 January 1, 2022, the authority must submit quarterly reports to the
35 caseload forecast work group on the number of individuals who are
36 presumptively eligible to receive health care coverage under Title
37 XIX or Title XXI of the federal social security act but are awaiting
38 for the authority to complete eligibility determination, the number
39 of individuals who were presumptively eligible but are now receiving
40 health care coverage with the maximum federal match under Title XIX

1 or Title XXI of the federal social security act, and outreach
2 activities including the work with managed care organizations.

3 (5) To ensure continuity of care and maximize the efficiency of
4 the program, the amount and scope of health care services provided to
5 individuals under this section must be the same as that provided to
6 pregnant and postpartum persons under medical assistance, as defined
7 in RCW 74.09.520.

8 (6) In administering this program, the authority must seek any
9 available federal financial participation under the medical
10 assistance program, as codified at Title XIX of the federal social
11 security act, the state children's health insurance program, as
12 codified at Title XXI of the federal social security act, and any
13 other federal funding sources that are now available or may become
14 available. This includes, but is not limited to, ensuring the state
15 is receiving the maximum federal match for individuals who are
16 presumptively eligible to receive health care coverage under Title
17 XIX or Title XXI of the federal social security act by expediting
18 completion of the individual's eligibility determination.

19 (7) Working with stakeholder and community organizations and the
20 Washington health benefit exchange, the authority must establish a
21 comprehensive community education and outreach campaign to facilitate
22 applications for and enrollment in the program or into a more
23 appropriate program where the state receives maximum federal match.
24 Subject to the availability of amounts appropriated for this specific
25 purpose, the education and outreach campaign must provide culturally
26 and linguistically accessible information to facilitate participation
27 in the program, including but not limited to enrollment procedures,
28 program services, and benefit utilization.

29 (8) Beginning January 1, 2022, the managed care organizations
30 contracted with the authority to provide postpartum coverage must
31 annually report to the legislature on their work to improve maternal
32 health for enrollees, including but not limited to postpartum
33 services offered to enrollees, the percentage of enrollees utilizing
34 each postpartum service offered, outreach activities to engage
35 enrollees in available postpartum services, and efforts to collect
36 eligibility information for the authority to ensure the enrollee is
37 in the most appropriate program for the state to receive the maximum
38 federal match.

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