

FINAL BILL REPORT

2SSB 5945

PARTIAL VETO C 545 L 09 Synopsis as Enacted

Brief Description: Creating the Washington health partnership plan.

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

Senate Committee on Health & Long-Term Care
Senate Committee on Ways & Means
House Committee on Health Care & Wellness
House Committee on Health & Human Services Appropriations

Background: The 2008 Legislature passed ESSB 6333 calling for an analysis of five health care reform proposals, including the Washington Health Partnership as outlined in legislation. The Legislature contracted with Mathematica Policy Research, Inc. to model the coverage and economic impacts of each proposal, and their initial analysis is available.

The Department of Social and Health Services (DSHS), Health Recovery Services Administration (HRSA), administers the state's medical assistance programs which include Medicaid and the State Children's Health Insurance Programs (SCHIP). The federal programs are established in the Social Security Act under Titles XIX and XXI, respectively. In general, the Medicaid program has categorical eligibility that focuses on low-income children, low-income families, or low-income individuals that meet the aged, blind, or disabled definitions. Other adults not eligible for these programs may have access to medical coverage through the state-funded programs such as the General Assistance Unemployable (GAU) program or the Basic Health program; however, the Governor's budget proposal for the upcoming biennium included elimination of the GAU program and a 42 percent cut of the Basic Health program.

Summary: DSHS must apply for a federal waiver to expand medical assistance with a single eligibility standard for low-income persons, phased-in with incremental steps for low-income parents and individuals with income up to 200 percent of the federal poverty level. The waiver must include a single seamless application and eligibility determination system for all low-income populations included in the waiver. To the extent permitted under federal law, the program must be designed as a single program with a common core benefit package that may be similar to the Basic Health benefit package or an alternative benefit package

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approved by the federal Department of Health and Human Services, with the option of supplemental coverage for some categorical groups such as children or the individuals in the Aged, Blind and Disabled program.

The waiver should explore creative and innovative approaches and program features; the ability to impose enrollment limits or benefit design changes; opportunities to maximize enrollment in employer-sponsored health insurance when it is cost-effective for the state; and opportunities to share savings that might accrue to the federal Medicare program for those individuals that are dually eligible for Medicare and Medicaid. DSHS must hold ongoing stakeholder discussions as the waiver request is developed and provide opportunities for public review and comment. DSHS and HCA must identify statutory changes that may be necessary to ensure successful and timely implementation of the waiver and an Apple Health Program for adults. Implementation of any approved waiver must be authorized by the Legislature.

DSHS must submit a request to the federal Department of Health and Human Services to modify the current family planning waiver, to provide coverage for sexually transmitted disease testing and treatment; to return to the eligibility standards used in 2005 including citizenship documentation, insurance eligibility standards, and confidential service availability for minors and survivors of domestic and sexual violence; and within available funds, increase the eligibility to 250 percent of the federal poverty level to coordinate with the income eligibility for the maternity care services.

Statutes directing Medicaid waivers and state plan amendments in 2007 and 2002 are repealed.

Votes on Final Passage:

Senate	28	19	
House	62	35	(House amended)
Senate	28	19	(Senate concurred)

Effective: July 26, 2009

Partial Veto Summary: The Governor vetoed the section creating the advisory group and requiring quarterly meetings.