

1 (3) Premium assistance can provide medicaid beneficiaries the same
2 access to providers as privately insured individuals by giving them
3 access to the commercial market, while at the same time ensuring
4 providers are paid market rates for individuals.

5 (4) Premium assistance has been available for states to use the
6 medicaid program to wrap around employer coverage for an employed
7 individual who is also eligible for medicaid, and for enrollees in the
8 children's health insurance program. Premium assistance in the
9 medicaid program has required states provide enrollees with all the
10 benefits an enrollee is entitled to under medicaid and ensure the cost-
11 sharing does not exceed the federal medicaid rules.

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

14 (1) The authority shall submit a waiver request to the federal
15 centers for medicare and medicaid to implement a targeted premium
16 assistance program for the expansion adults, identified in section
17 1902(a)(1)(A)(i)(VIII), of the social security act, with incomes above
18 one hundred percent of the federal poverty level, and for children
19 covered in the children's health insurance program with incomes above
20 two hundred percent of the federal poverty level, with a goal of
21 providing seamless coverage through the health benefit exchange and
22 improving opportunities for families to be covered in the same health
23 plan. The waiver request must include the possibility of applying
24 premiums for individuals and cost-sharing that may exceed the five
25 percent of family income required in federal law.

26 (2) The authority shall submit a report to the legislature and the
27 governor that provides recommendations to make the targeted premium
28 assistance program cost neutral by September 1, 2014. The authority is
29 encouraged to be creative, use subject matter experts, and exhaust all
30 possible options to achieve cost neutrality. The report shall also
31 include a detailed plan and timeline. A formal waiver proposal must be
32 submitted with the goal of implementation by October 1, 2015, or the
33 first day of the open enrollment period for the health benefit exchange
34 in calendar year 2016, whichever is earlier.

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