

# SENATE BILL REPORT

## SB 6833

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As Reported By Senate Committee On:  
Ways & Means, March 6, 2002

**Title:** An act relating to medical care for certain immigrants.

**Brief Description:** Revising medical care eligibility for certain immigrants.

**Sponsors:** Senators Brown, Winsley, Thibaudeau and Franklin.

**Brief History:**

**Committee Activity:** Ways & Means: 3/5/02, 3/6/02 [DPS].

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### SENATE COMMITTEE ON WAYS & MEANS

**Majority Report:** That Substitute Senate Bill No. 6833 be substituted therefor, and the substitute bill do pass.

Signed by Senators Brown, Chair; Regala, Vice Chair; Fairley, Vice Chair; Fraser, Honeyford, Kline, Kohl-Welles, Long, Poulsen, Rasmussen, B. Sheldon, Snyder, Spanel, Thibaudeau, Winsley and Zarelli.

**Staff:** Tim Yowell (786-7435)

**Background:** Under federal law, immigrants who cannot document that they are residing in the country legally, and most of those who have entered the country legally within the previous five years, are not eligible for most Medicaid services. Under state law, both groups are eligible for the same services which they would receive under Medicaid, with the state covering 100 percent of the cost. The Department of Social and Health Services estimates that it will spend approximately \$28 million providing "state-only" medical assistance next year, on behalf of about 27,000 immigrants per month. About 4,200 will be children and adults who have immigrated legally within the previous five years. About 22,800 will be children whose families cannot document their legal residency.

Both groups of immigrants are eligible for Medicaid coverage of emergency medical conditions and for enrollment in the state's Basic Health Plan.

**Summary of Substitute Bill:** Full-scope coverage under the state medical assistance program is only available to the extent that persons are eligible for Medicaid.

**Substitute Bill Compared to Original Bill:** The substitute clarifies that legal immigrants continue to be eligible for Medicaid coverage for emergent conditions, and after five years of residency for Medicaid coverage of all conditions.

**Appropriation:** None.

**Fiscal Note:** Not requested.

**Effective Date:** The bill takes effect on October 1, 2002.

**Testimony For:** None.

**Testimony Against:** The transition from medical assistance to the Basic Health Plan would likely cause many of these children to fall through the cracks. The Basic Health Plan doesn't cover dental and vision coverage, which these children need. Families may not access care when they need it because of co-pays, and some families won't be able to pay premiums because of low-income, cultural, and language barriers.

**Testified:** CON: Paul Barry, Children's Alliance; Sharon Case, Washington Association of Community and Migrant Health Centers.