
Health Care & Wellness Committee

SSB 5068

Brief Description: Improving maternal health outcomes by extending coverage during the postpartum period.

Sponsors: Senate Committee on Ways & Means (originally sponsored by Senators Randall, Rivers, Billig, Cleveland, Conway, Darneille, Das, Dhingra, Frockt, Hasegawa, Hunt, Keiser, Kuderer, Lias, Lovelett, Muzzall, Nguyen, Nobles, Saldaña, Salomon, Stanford, Warnick and Wilson, C.).

Brief Summary of Substitute Bill

- Expands medical assistance coverage for postpartum persons from 60 days following the end a pregnancy to one year after the end of a pregnancy.

Hearing Date: 3/10/21

Staff: Christopher Blake (786-7392).

Background:

Medicaid Coverage for Pregnant and Postpartum Persons.

The Health Care Authority administers the Medicaid program, which is a state-federal program that pays for health care for low-income state residents who meet certain eligibility criteria. Washington's Medicaid program, known as Apple Health, offers a complete medical benefits package to eligible families, children under age 19, low-income adults, certain disabled individuals, and pregnant women.

Apple Health provides coverage to pregnant individuals with countable income at or below 193 percent of the federal poverty level, regardless of citizenship or immigration status. Once an

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individual is enrolled, they are covered regardless of any change in income through the end of the calendar month that includes the sixtieth day after the end of the pregnancy.

Federal Activity Related to the COVID-19 Pandemic.

On January 31, 2020, the Secretary of Health and Human Services declared a federal public health emergency exists due to COVID-19. The declaration has been renewed several times and the most recent declaration expires on April 21, 2021.

On March 18, 2020, Congress passed the Families First Coronavirus Response Act which includes a provision to increase each state's federal matching rate by 6.2 percent during the federal public health emergency. To receive the increased matching rate under its medical assistance program, a state may not: (1) adopt more restrictive eligibility standards; (2) increase premiums under the state's program; (3) discontinue coverage for an enrolled individual prior to the end of the public health emergency period, unless the individual requests a voluntary termination or is no longer a resident of the state; or (4) fail to provide coverage for testing services and treatments for COVID-19.

Summary of Substitute Bill:

Eligibility for Apple Health coverage for pregnant and postpartum persons is expanded from 60 days from the end of the pregnancy to one year from the end of the pregnancy. The expanded coverage is implemented in two phases:

1. Apple Health coverage is extended from 60 days to one year from the end of the pregnancy for pregnant or postpartum persons who are receiving postpartum coverage on or after the expiration of the federal public health emergency declaration related to COVID-19.
2. By June 1, 2022, Apple Health coverage is available for 12 months following the end of a pregnancy for postpartum persons who reside in Washington, have an income of 193 percent of the federal poverty level, and are not eligible for other medical assistance programs. The coverage is available at any time and the person remains continuously eligible for 12 months regardless of any change in income during that period.

The Health Care Authority (Authority) may not enroll persons in the expanded pregnancy and postpartum program if they are eligible for other medical assistance programs that include a federal match component. The Authority must expedite eligibility determinations for those who are presumptively eligible for medical assistance programs with a federal match component. The Authority must submit quarterly reports to the Caseload Forecast Work Group on the number of people who are presumptively eligible and waiting for the completion of their determinations, the number of people who were presumptively eligible and now receiving health coverage, and the outreach activities that were undertaken.

The Authority must seek federal financial participation that may be available through current health care coverage programs and other current and future funding sources and may be used to fund the expanded pregnancy and postpartum coverage program. If federal matching funds are

not available for the expanded pregnancy and postpartum coverage program by the effective date of the act, the Authority must submit a waiver to the federal Centers for Medicare and Medicaid Services to request federal matching funds. The Authority must provide the expanded pregnancy and postpartum coverage to all eligible persons regardless of whether or not the waiver request is approved. By December 1, 2021, the Authority must report to the Legislature on the status of the waiver request and any necessary statutory changes.

The Authority must work with stakeholders, community organizations, and the Washington Health Benefit Exchange to establish a community education and outreach campaign to facilitate applications for and enrollment in the expanded pregnancy and postpartum coverage program or other more appropriate coverage.

Medicaid managed care organizations must report annually to the Legislature on their work to improve maternal health for their enrollees. The information must include postpartum services offered to enrollees, the percentage of enrollees using each service, outreach activities to engage enrollees in available services, and efforts to collect eligibility information to ensure the enrollees are placed in programs to receive the maximum federal match.

Appropriation: None.

Fiscal Note: Preliminary fiscal note available.

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