
Health Care & Wellness Committee

HB 2197

Brief Description: Concerning the availability of prevention services under medical assistance programs.

Sponsors: Representatives Orwall, Pollet, Berry, Fey, Reed, Fosse, Macri and Davis.

Brief Summary of Bill

- Directs the Health Care Authority to seek federal Medicaid funding for the provision of intervention-based prevention services.
- Requires the Department of Health to establish training program standards for programs that train health care providers to provide the prevention services.

Hearing Date: 1/19/24

Staff: Chris Blake (786-7392).

Background:

Medicaid is a program funded jointly by states and the federal government that provides health coverage to a variety of populations including eligible low-income adults, children, pregnant women, elderly adults, and people with disabilities. Medicaid is administered by states, according to federal requirements. Federal Medicaid law sets broad requirements for the program and mandates coverage of some populations and benefits, while leaving others optional. Within the federal limits, states make operational and policy decisions that determine who is eligible for enrollment, which services are covered, and how payments are set.

Each state specifies the nature and scope of its Medicaid program through a state plan that must be submitted and approved by the federal Centers for Medicare and Medicaid Services in order

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for the state to access federal Medicaid funds. The state plan can be amended as needed to reflect changes in state policy and federal law and regulation. In implementing a state's Medicaid program, states are required to comply with Medicaid requirements for statewideness, comparability, and freedom of choice unless the state has received a waiver of these provisions.

Summary of Bill:

The Health Care Authority (Authority) must seek approval from the federal Centers for Medicare and Medicaid Services for financial participation in the costs of providing intervention-based prevention services, including community violence prevention services. The prevention services must be evidence-informed, trauma-informed, supportive, and nonpsychotherapeutic services for the purpose of promoting improved health outcomes, trauma recovery, and positive behavioral change.

The Authority must adopt criteria for those who may provide the prevention services. The criteria must authorize health care providers to provide the prevention services if they are licensed to practice a health profession and submit to the Authority proof of successful completion of a Department of Health approved prevention services training course.

The Department of Health is directed to establish standards for programs that train health care providers with an appropriate scope of practice to provide prevention services. At a minimum, training standards must include instruction on basic trauma-informed care, community-based prevention strategies, case management, referral practices, advocacy practices, and privacy requirements.

Appropriation: None.

Fiscal Note: Requested on January 10, 2024.

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