

# HOUSE BILL REPORT

## E2SSB 5580

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### As Reported by House Committee On:

Health Care & Wellness  
Appropriations

**Title:** An act relating to improving maternal health outcomes.

**Brief Description:** Improving maternal health outcomes.

**Sponsors:** Senate Committee on Ways & Means (originally sponsored by Senators Muzzall, Cleveland, Braun, Rivers, Warnick, Hasegawa, Kuderer, Lovelett, Randall, Shewmake and Wilson, J.).

### Brief History:

#### Committee Activity:

Health Care & Wellness: 3/22/23, 3/28/23 [DPA];  
Appropriations: 4/1/23, 4/4/23 [DPA(APP w/o HCW)].

#### Brief Summary of Engrossed Second Substitute Bill (As Amended By Committee)

- Increases the federal poverty level (FPL) threshold for pregnant and postpartum persons eligible for Medicaid from equal to or below 193 percent to 210 percent of the FPL.
- Directs the Health Care Authority (HCA) to create a postdelivery and transitional care program for people with substance use disorder at the time of delivery allowing for extended postdelivery hospital care by January 1, 2025.
- Requires the HCA to update the current Maternity Support Services Program by January 1, 2025, to address perinatal outcomes and increase equity and healthier birth outcomes.

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### HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

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*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.*

**Majority Report:** Do pass as amended. Signed by 17 members: Representatives Riccelli, Chair; Bateman, Vice Chair; Schmick, Ranking Minority Member; Hutchins, Assistant Ranking Minority Member; Barnard, Bronoske, Davis, Graham, Harris, Macri, Maycumber, Mosbrucker, Orwall, Simmons, Stonier, Thai and Tharinger.

**Staff:** Kim Weidenaar (786-7120).

**Background:**

Medicaid Coverage for Pregnant and Postpartum Persons.

The Health Care Authority (HCA) 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 persons.

Apple Health provides coverage to pregnant individuals with countable income at or below 193 percent of the federal poverty level. Once an individual is enrolled, the person remains continuously eligible for 12 months following the end of a pregnancy regardless of any change in income during that period.

Maternity Support Services Program.

Under the state's Maternity Care Access Act, the HCA established First Steps to provide access to services for eligible clients and their infants. The Maternity Support Services Program is a component of First Steps and delivers enhanced preventive health and education services and brief interventions to eligible pregnant clients to improve and promote healthy birth outcomes. The services are provided as early in a pregnancy as possible, based on the client's individual risks and needs. State regulations establish client eligibility, qualifications, and requirements for providers to participate, and documentation and reimbursement requirements.

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**Summary of Amended Bill:**

By January 1, 2025, the Health Care Authority (HCA) must create a postdelivery and transitional care program (postdelivery program) that allows for extended postdelivery hospital care for individuals with substance use disorder at the time of delivery. In administering the postdelivery program, the HCA must seek any available federal participation through Medicaid or other federal funding sources. The HCA must:

- allow for up to five additional days of hospitalization for the birth parent;
- provide the birth parent access to integrated medical care, including medication management, behavioral health, addiction medicine, specialty consultations, and psychiatric providers;
- provide the birth parent access to social work support and coordination with the

- Department of Children, Youth, and Families to develop a plan for safe care;
- allow dedicated time for health professionals to assist in facilitating early bonding between the birth parent and infant; and
- establish provider requirements and pay only for those qualified providers for services provided through the postdelivery program.

Subject to appropriated funds, the HCA must update the Maternity Support Services Program (MSS Program) to address perinatal outcomes and increase equity and healthier birth outcomes. By January 1, 2025, the HCA must:

- update current screening tools to be culturally relevant, include current risk factors, ensure the tools address health equity, and include questions identifying various social determinants of health;
- ensure care coordination;
- develop a mechanism to collect results of the MSS Program screenings and evaluate the outcomes of the MSS Program. The MSS Program evaluation must identify gaps, strengths, and weaknesses of the MSS Program and make recommendations for how the MSS Program may improve to better align with the HCA's maternal and infant health initiatives;
- increase the allowable benefit and reimbursement rates with the goal of increasing utilization of services to all MSS Program clients; and
- adopt rules to implement these requirements.

By November 1, 2023, the income standards for pregnant and postpartum persons eligible for Apple Health pregnancy and postpartum coverage is increased to a countable income equal to or below 210 percent of the federal poverty level.

#### **Amended Bill Compared to Engrossed Second Substitute Bill:**

The amended bill aligns the timelines for increasing the income eligibility thresholds for pregnant and postpartum Apple Health coverage so that the increase for postpartum eligibility also goes into effect by November 1, 2023.

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**Appropriation:** None.

**Fiscal Note:** Available.

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

#### **Staff Summary of Public Testimony:**

(In support) This bill is like a good friend; the more you get to know it the more you like it. Lots of work was done over the interim on this bill and the goal is to create a more thorough

program postdelivery, to make some other updates to the existing Maternity Support Services Program, and to increase the eligibility threshold for pregnancy and postpartum to 210 percent of the federal poverty level. The basis of this bill is to serve our most vulnerable members of society; babies who are born to mothers suffering from a substance use disorder. The goal is to get them on to the right foot moving forward. These requirements go into effect January 1, 2025.

(Opposed) None.

**Persons Testifying:** Senator Ron Muzzall, prime sponsor.

**Persons Signed In To Testify But Not Testifying:** None.

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## HOUSE COMMITTEE ON APPROPRIATIONS

**Majority Report:** Do pass as amended by Committee on Appropriations and without amendment by Committee on Health Care & Wellness. Signed by 30 members: Representatives Ormsby, Chair; Bergquist, Vice Chair; Gregerson, Vice Chair; Macri, Vice Chair; Stokesbary, Ranking Minority Member; Chambers, Assistant Ranking Minority Member; Corry, Assistant Ranking Minority Member; Berg, Chandler, Chopp, Connors, Couture, Davis, Dye, Fitzgibbon, Hansen, Harris, Lekanoff, Pollet, Riccelli, Rude, Ryu, Sandlin, Schmick, Senn, Simmons, Slatter, Steele, Stonier and Tharinger.

**Staff:** Meghan Morris (786-7119).

### **Summary of Recommendation of Committee On Appropriations Compared to Recommendation of Committee On Health Care & Wellness:**

A null and void clause is added, making the bill null and void unless funded in the budget.

**Appropriation:** None.

**Fiscal Note:** Available.

**Effective Date of Amended Bill:** The bill takes effect 90 days after adjournment of the session in which the bill is passed. However, the bill is null and void unless funded in the budget.

### **Staff Summary of Public Testimony:**

(In support) None.

(Opposed) None.

**Persons Testifying:** None.

**Persons Signed In To Testify But Not Testifying:** None.