

HOUSE BILL REPORT

HB 1889

*As Reported By House Committee on:
Appropriations*

Title: An act relating to increasing the deductible for medical care under the limited casualty program.

Brief Description: Increasing the maximum deductible an indigent person pays under the limited casualty program.

Sponsor(s): Representative Locke; by request of Office of Financial Management and Dept. of Social and Health Services.

Brief History:

Reported by House Committee on:
Appropriations, March 5, 1991, DP.

**HOUSE COMMITTEE ON
APPROPRIATIONS**

Majority Report: *Do pass.* Signed by 17 members: Representatives Locke, Chair; Inslee, Vice Chair; Spanel, Vice Chair; Appelwick; Braddock; Dorn; Ebersole; Ferguson; Hine; Peery; Pruitt; Rust; H. Sommers; Sprenkle; Valle; Wang; and Wineberry.

Minority Report: *Do not pass.* Signed by 13 members: Representatives Silver, Ranking Minority Member; Morton, Assistant Ranking Minority Member; Belcher; Bowman; Brekke; Fuhrman; Holland; Lisk; May; McLean; Mielke; Nealey; and Vance.

Staff: Wayne Kawakami (786-7384).

Background: The Department of Social and Health Services' (DSHS) Medically Indigent Program is a state-only funded program within Medical Assistance. This program provides limited medical care to persons who have income or resources too high to qualify for income assistance, but insufficient to cover incurred medical expenses. The projected medically indigent caseload for the 1991-93 biennium is 2,875 with a budget of about \$64 million in General Fund-State.

Services provided are limited to primarily inpatient emergency conditions. Participants must satisfy a deductible of \$500 dollars in any 12-month period.

Increasing the deductible to \$1,500 would result in savings of \$19,500,000 in General Fund-State and \$146,000 in Federal Funds.

Summary of Bill: On July 1, 1991, the deductible for care under the Medically Indigent Program is increased from \$500 to \$1,500 in any 12-month period.

Fiscal Note: Available.

Effective Date: The bill contains an emergency clause and takes effect July 1, 1991.

Testimony For: The savings are assumed in the governor's budget. Hospitals will attempt to cooperate and mitigate impact.

Testimony Against: None.

Witnesses: Bob Lolcama, DSHS; and Jeff Mero, Washington State Hospital Association.