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**SUBSTITUTE HOUSE BILL 1669**

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**State of Washington 64th Legislature 2015 Regular Session**

**By** House Health Care & Wellness (originally sponsored by Representatives Riccelli, Harris, Cody, Tharinger, Van De Wege, Jinkins, Sawyer, Moeller, and S. Hunt)

AN ACT Relating to continuity of health care coverage; adding a new section to chapter 74.09 RCW; creating a new section; and providing an expiration date.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

NEW SECTION. **Sec.**  A new section is added to chapter 74.09 RCW to read as follows:

(1)(a) A task force on continuity of health coverage and care is established with the following members:

(i) The governor shall appoint members representing:

(A) Patients;

(B) Consumer advocates;

(C) Labor unions;

(D) Business interests;

(E) Health plans that participate in the medicaid program;

(F) Health plans that offer coverage in the commercial insurance market;

(G) Health care providers;

(H) Hospitals;

(I) The Washington health benefit exchange;

(J) The Washington state health care authority;

(K) The Washington state department of social and health services;

(L) The Washington state office of the insurance commissioner;

(M) The Washington state department of health;

(N) The Washington state department of labor and industries; and

(O) Accountable communities of health.

(ii) The governor shall invite the participation of representatives of tribes and urban Indian health providers in Washington state to serve as members of the task force.

(b) The governor shall convene the initial meeting of the task force. The task force shall choose its chair from among its membership.

(c) Meetings of the task force shall be open to the public and shall provide an opportunity for public comment.

(2) The task force shall review and analyze data and identify options and strategies in regards to:

(a) Easing transitions between different types of health plans, including employer-sponsored insurance, individual insurance, and public programs;

(b) Identifying the assistance necessary to help enrollees when they transition between health insurance plans or lose eligibility for coverage;

(c) Identifying options to reduce financial and eligibility barriers to obtaining and maintaining coverage; and

(d) Establishing accountability and coordination among state agencies and the Washington health benefit exchange.

(3) Staff support for the task force shall be provided by the office of financial management.

(4) Members of the task force, except those representing an employer or organization, are entitled to be reimbursed for travel expenses in accordance with RCW 43.03.050 and 43.03.060.

(5) The task force shall report its preliminary findings and recommendations to the governor and the appropriate committees of the legislature by December 1, 2015, and a final report must be submitted by December 1, 2016. The final report shall address the task force's conclusions related to the items considered in subsection (2) of this section, as informed by the results of the study in section 2 of this act.

(6) This section expires June 30, 2017.

NEW SECTION. **Sec.**  The office of financial management shall contract for a study of the affordability and availability of health care coverage for Washington residents to be completed by March 1, 2016, and submitted to the governor, the legislature, and the task force on continuity of health coverage and care established in section 1 of this act. The study shall evaluate:

(1) The availability and affordability of health coverage options for Washington residents;

(2) The rates at which residents could transition between health insurance programs and discontinue coverage due to fluctuations in income and circumstances;

(3) Options for improving affordability for low-income residents through a microsimulation model that fully takes into account all relevant eligibility factors, including unaccepted offers of employer-sponsored insurance, and through an analysis of state budget offsets; and

(4) The potential for improved health coverage to result in savings for the state budget.

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