S-1217.2

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**SENATE BILL 5806**

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

**By** Senators Jayapal, Frockt, Keiser, Cleveland, Conway, Litzow, Rivers, Darneille, and Angel

AN ACT Relating to equitable access to highly effective contraception for patients enrolled in a medicaid-funded plan; adding a new section to chapter 74.09 RCW; and creating a new section.

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

NEW SECTION. **Sec.**  The legislature finds that nearly half of all pregnancies in Washington are unplanned. The legislature also finds that research demonstrates that women with unplanned pregnancies receive less prenatal care and are at higher risk for premature delivery and delivering a child with a low birth weight or neurological disorders that have been linked to poor academic performance. The legislature also finds that more than half of all births in Washington are covered by publicly funded health plans and programs. The legislature finds further that Washington has a long and consistent history of promoting equitable access to contraceptives regardless of family income. The legislature also finds that long-acting reversible contraception is the most effective and efficient form of birth control and planning, with a failure rate of less than one percent. The legislature finds further that reduced reimbursement rates for long-acting reversible contraception unintentionally may create an incentive for the use of less effective hormonal birth control methods, resulting in patients with medicaid coverage having limited access to the most effective methods of birth control. The legislature also finds that ensuring equitable access to all birth control methods will increase the use of these highly effective methods, resulting in reduced rates of unintended pregnancies and the associated impact to the medicaid budget.

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

(1) The authority shall assure that the total medicaid rate paid for the services required for the provision of long-acting reversible contraceptive methods is at least equivalent with the total rate paid for the services required to provide oral contraceptives. The authority shall assure that rates paid for services associated with the provision of contraceptives are adjusted as directed in this section within the medicaid take charge waiver program as well as within the Title XIX medicaid program.

(2) The authority shall not reduce the rate for any family planning service to comply with this section and contracts with managed care plans must ensure the rate for any family planning service is not reduced to comply with this section.

(3) The authority shall ensure that rates for family planning services are sufficient to support network adequacy standards.

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