
HOUSE BILL 2207

State of Washington 65th Legislature 2017 1st Special Session

By Representatives MacEwen and Taylor

1 AN ACT Relating to prohibiting state health care plans from
2 covering individuals for repeated treatment for hepatitis C
3 infection; and amending RCW 41.05.075.

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

5 **Sec. 1.** RCW 41.05.075 and 2007 c 259 s 34 are each amended to
6 read as follows:

7 (1) The administrator shall provide benefit plans designed by the
8 board through a contract or contracts with insuring entities, through
9 self-funding, self-insurance, or other methods of providing insurance
10 coverage authorized by RCW 41.05.140.

11 (2) The administrator shall establish a contract bidding process
12 that:

13 (a) Encourages competition among insuring entities;

14 (b) Maintains an equitable relationship between premiums charged
15 for similar benefits and between risk pools including premiums
16 charged for retired state and school district employees under the
17 separate risk pools established by RCW 41.05.022 and 41.05.080 such
18 that insuring entities may not avoid risk when establishing the
19 premium rates for retirees eligible for medicare;

20 (c) Is timely to the state budgetary process; and

1 (d) Sets conditions for awarding contracts to any insuring
2 entity.

3 (3) The administrator shall establish a requirement for review of
4 utilization and financial data from participating insuring entities
5 on a quarterly basis.

6 (4) The administrator shall centralize the enrollment files for
7 all employee and retired or disabled school employee health plans
8 offered under chapter 41.05 RCW and develop enrollment demographics
9 on a plan-specific basis.

10 (5) All claims data shall be the property of the state. The
11 administrator may require of any insuring entity that submits a bid
12 to contract for coverage all information deemed necessary including:

13 (a) Subscriber or member demographic and claims data necessary
14 for risk assessment and adjustment calculations in order to fulfill
15 the administrator's duties as set forth in this chapter; and

16 (b) Subscriber or member demographic and claims data necessary to
17 implement performance measures or financial incentives related to
18 performance under subsection (7) of this section.

19 (6) All contracts with insuring entities for the provision of
20 health care benefits shall provide that the beneficiaries of such
21 benefit plans may use on an equal participation basis the services of
22 practitioners licensed pursuant to chapters 18.22, 18.25, 18.32,
23 18.53, 18.57, 18.71, 18.74, 18.83, and 18.79 RCW, as it applies to
24 registered nurses and advanced registered nurse practitioners.
25 However, nothing in this subsection may preclude the administrator
26 from establishing appropriate utilization controls approved pursuant
27 to RCW 41.05.065(2) (a), (b), and (d).

28 (7) The administrator shall, in collaboration with other state
29 agencies that administer state purchased health care programs,
30 private health care purchasers, health care facilities, providers,
31 and carriers:

32 (a) Use evidence-based medicine principles to develop common
33 performance measures and implement financial incentives in contracts
34 with insuring entities, health care facilities, and providers that:

35 (i) Reward improvements in health outcomes for individuals with
36 chronic diseases, increased utilization of appropriate preventive
37 health services, and reductions in medical errors; and

38 (ii) Increase, through appropriate incentives to insuring
39 entities, health care facilities, and providers, the adoption and use

1 of information technology that contributes to improved health
2 outcomes, better coordination of care, and decreased medical errors;

3 (b) Through state health purchasing, reimbursement, or pilot
4 strategies, promote and increase the adoption of health information
5 technology systems, including electronic medical records, by
6 hospitals as defined in RCW 70.41.020(~~(+4)~~) (7), integrated delivery
7 systems, and providers that:

8 (i) Facilitate diagnosis or treatment;

9 (ii) Reduce unnecessary duplication of medical tests;

10 (iii) Promote efficient electronic physician order entry;

11 (iv) Increase access to health information for consumers and
12 their providers; and

13 (v) Improve health outcomes;

14 (c) Coordinate a strategy for the adoption of health information
15 technology systems using the final health information technology
16 report and recommendations developed under chapter 261, Laws of 2005.

17 (8) The administrator may permit the Washington state health
18 insurance pool to contract to utilize any network maintained by the
19 authority or any network under contract with the authority.

20 (9) The administrator shall not provide, nor may the board
21 design, a health plan through a contract with insuring entities,
22 through self-funding, self-insurance, or other methods that provides
23 individuals with coverage for more than a single infection of
24 hepatitis C during the individual's lifetime.

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