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HOUSE BILL 2660

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State of Washington

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2018 Regular Session

**By** Representatives Stonier, Harris, Orwall, Macri, Clibborn, Santos, Riccelli, Gregerson, Reeves, Dolan, Valdez, Kloba, Graves, Appleton, Jinkins, Stambaugh, Bergquist, Kirby, Chapman, Wylie, McBride, Doglio, Pollet, Sells, Slatter, Kilduff, DeBolt, Frame, and Stanford

Read first time 01/11/18. Referred to Committee on Appropriations.

1 AN ACT Relating to continuing access to medicaid services;  
2 amending RCW 74.09.470; adding a new section to chapter 74.09 RCW;  
3 and declaring an emergency.

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

5 NEW SECTION. **Sec. 1.** A new section is added to chapter 74.09  
6 RCW to read as follows:

7 Medical assistance shall be provided for pregnant women who  
8 reside in Washington state and whose family income at the time of  
9 application is no greater than one hundred ninety-three percent of  
10 the federal poverty level as adjusted for family size and determined  
11 annually by the federal department of health and human services. In  
12 administering the program, the authority shall take such actions as  
13 may be necessary to assure the receipt of federal financial  
14 participation under the medical assistance program and any other  
15 federal funding sources that are currently available or may become  
16 available in the future.

17 **Sec. 2.** RCW 74.09.470 and 2011 1st sp.s. c 33 s 2 are each  
18 amended to read as follows:

19 (1) Consistent with the goals established in RCW 74.09.402,  
20 through the apple health for kids program authorized in this section,

1 the authority shall provide affordable health care coverage to  
2 children under the age of nineteen who reside in Washington state and  
3 whose family income at the time of enrollment is not greater than  
4 ~~((two))~~ three hundred ~~((fifty))~~ twelve percent of the federal poverty  
5 level as adjusted for family size and determined annually by the  
6 federal department of health and human services ~~((, and effective~~  
7 ~~January 1, 2009, and only to the extent that funds are specifically~~  
8 ~~appropriated therefor, to children whose family income is not greater~~  
9 ~~than three hundred percent of the federal poverty level))~~). In  
10 administering the program, the authority shall take such actions as  
11 may be necessary to ensure the receipt of federal financial  
12 participation under the medical assistance program, as codified at  
13 Title XIX of the federal social security act, the state children's  
14 health insurance program, as codified at Title XXI of the federal  
15 social security act, and any other federal funding sources that are  
16 now available or may become available in the future. The authority  
17 and the caseload forecast council shall estimate the anticipated  
18 caseload and costs of the program established in this section.

19 (2) The authority shall accept applications for enrollment for  
20 children's health care coverage; establish appropriate minimum-  
21 enrollment periods, as may be necessary; and determine eligibility  
22 based on current family income. The authority shall make eligibility  
23 determinations within the time frames for establishing eligibility  
24 for children on medical assistance, as defined by RCW 74.09.510. The  
25 application and annual renewal processes shall be designed to  
26 minimize administrative barriers for applicants and enrolled clients,  
27 and to minimize gaps in eligibility for families who are eligible for  
28 coverage. If a change in family income results in a change in the  
29 source of funding for coverage, the authority shall transfer the  
30 family members to the appropriate source of funding and notify the  
31 family with respect to any change in premium obligation, without a  
32 break in eligibility. The authority shall use the same eligibility  
33 redetermination and appeals procedures as those provided for children  
34 on medical assistance programs. The authority shall modify its  
35 eligibility renewal procedures to lower the percentage of children  
36 failing to annually renew. The authority shall manage its outreach,  
37 application, and renewal procedures with the goals of: (a) Achieving  
38 year by year improvements in enrollment, enrollment rates, renewals,  
39 and renewal rates; (b) maximizing the use of existing program  
40 databases to obtain information related to earned and unearned income

1 for purposes of eligibility determination and renewals, including,  
2 but not limited to, the basic food program, the child care subsidy  
3 program, federal social security administration programs, and the  
4 employment security department wage database; (c) streamlining  
5 renewal processes to rely primarily upon data matches, online  
6 submissions, and telephone interviews; and (d) implementing any other  
7 eligibility determination and renewal processes to allow the state to  
8 receive an enhanced federal matching rate and additional federal  
9 outreach funding available through the federal children's health  
10 insurance program reauthorization act of 2009 by January 2010. The  
11 department shall advise the governor and the legislature regarding  
12 the status of these efforts by September 30, 2009. The information  
13 provided should include the status of the department's efforts, the  
14 anticipated impact of those efforts on enrollment, and the costs  
15 associated with that enrollment.

16 (3) To ensure continuity of care and ease of understanding for  
17 families and health care providers, and to maximize the efficiency of  
18 the program, the amount, scope, and duration of health care services  
19 provided to children under this section shall be the same as that  
20 provided to children under medical assistance, as defined in RCW  
21 74.09.520.

22 (4) The primary mechanism for purchasing health care coverage  
23 under this section shall be through contracts with managed health  
24 care systems as defined in RCW 74.09.522, subject to conditions,  
25 limitations, and appropriations provided in the biennial  
26 appropriations act. However, the authority shall make every effort  
27 within available resources to purchase health care coverage for  
28 uninsured children whose families have access to dependent coverage  
29 through an employer-sponsored health plan or another source when it  
30 is cost-effective for the state to do so, and the purchase is  
31 consistent with requirements of Title XIX and Title XXI of the  
32 federal social security act. To the extent allowable under federal  
33 law, the authority shall require families to enroll in available  
34 employer-sponsored coverage, as a condition of participating in the  
35 program established under this section, when it is cost-effective for  
36 the state to do so. Families who enroll in available employer-  
37 sponsored coverage under this section shall be accounted for  
38 separately in the annual report required by RCW 74.09.053.

39 (5)(a) To reflect appropriate parental responsibility, the  
40 authority shall develop and implement a schedule of premiums for

1 children's health care coverage due to the authority from families  
2 with income greater than two hundred ten percent of the federal  
3 poverty level. For families with income greater than two hundred  
4 (~~fifty~~) sixty percent of the federal poverty level, the premiums  
5 shall be established in consultation with the senate majority and  
6 minority leaders and the speaker and minority leader of the house of  
7 representatives. For children eligible for coverage under the  
8 federally funded children's health insurance program, Title XXI of  
9 the federal social security act, premiums shall be set at a  
10 reasonable level that does not pose a barrier to enrollment. The  
11 amount of the premium shall be based upon family income and shall not  
12 exceed the premium limitations in Title XXI of the federal social  
13 security act. For children who are not eligible for coverage under  
14 the federally funded children's health insurance program, premiums  
15 shall be set every two years in an amount no greater than the average  
16 state-only share of the per capita cost of coverage in the state-  
17 funded children's health program.

18 (b) Premiums shall not be imposed on children in households at or  
19 below two hundred ten percent of the federal poverty level as  
20 articulated in RCW 74.09.055.

21 (c) Beginning no later than January 1, 2010, the authority shall  
22 offer families whose income is greater than three hundred twelve  
23 percent of the federal poverty level the opportunity to purchase  
24 health care coverage for their children through the programs  
25 administered under this section without an explicit premium subsidy  
26 from the state. The design of the health benefit package offered to  
27 these children should provide a benefit package substantially similar  
28 to that offered in the apple health for kids program, and may differ  
29 with respect to cost-sharing, and other appropriate elements from  
30 that provided to children under subsection (3) of this section  
31 including, but not limited to, application of preexisting conditions,  
32 waiting periods, and other design changes needed to offer affordable  
33 coverage. The amount paid by the family shall be in an amount equal  
34 to the rate paid by the state to the managed health care system for  
35 coverage of the child, including any associated and administrative  
36 costs to the state of providing coverage for the child. Any pooling  
37 of the program enrollees that results in state fiscal impact must be  
38 identified and brought to the legislature for consideration.

39 (6) The authority shall undertake and continue a proactive,  
40 targeted outreach and education effort with the goal of enrolling

1 children in health coverage and improving the health literacy of  
2 youth and parents. The authority shall collaborate with the  
3 department of social and health services, department of health, local  
4 public health jurisdictions, the office of the superintendent of  
5 public instruction, the department of (~~early learning~~) children,  
6 youth, and families, health educators, health care providers, health  
7 carriers, community-based organizations, and parents in the design  
8 and development of this effort. The outreach and education effort  
9 shall include the following components:

10 (a) Broad dissemination of information about the availability of  
11 coverage, including media campaigns;

12 (b) Assistance with completing applications, and community-based  
13 outreach efforts to help people apply for coverage. Community-based  
14 outreach efforts should be targeted to the populations least likely  
15 to be covered;

16 (c) Use of existing systems, such as enrollment information from  
17 the free and reduced-price lunch program, the department of (~~early~~  
18 ~~learning~~) children, youth, and families child care subsidy program,  
19 the department of health's women, infants, and children program, and  
20 the early childhood education and assistance program, to identify  
21 children who may be eligible but not enrolled in coverage;

22 (d) Contracting with community-based organizations and government  
23 entities to support community-based outreach efforts to help families  
24 apply for coverage. These efforts should be targeted to the  
25 populations least likely to be covered. The authority shall provide  
26 informational materials for use by government entities and community-  
27 based organizations in their outreach activities, and should identify  
28 any available federal matching funds to support these efforts;

29 (e) Development and dissemination of materials to engage and  
30 inform parents and families statewide on issues such as: The benefits  
31 of health insurance coverage; the appropriate use of health services,  
32 including primary care provided by health care practitioners licensed  
33 under chapters 18.71, 18.57, 18.36A, and 18.79 RCW, and emergency  
34 services; the value of a medical home, well-child services and  
35 immunization, and other preventive health services with linkages to  
36 department of health child profile efforts; identifying and managing  
37 chronic conditions such as asthma and diabetes; and the value of good  
38 nutrition and physical activity;

39 (f) An evaluation of the outreach and education efforts, based  
40 upon clear, cost-effective outcome measures that are included in

1 contracts with entities that undertake components of the outreach and  
2 education effort;

3 (g) An implementation plan to develop online application  
4 capability that is integrated with the automated client eligibility  
5 system, and to develop data linkages with the office of the  
6 superintendent of public instruction for free and reduced-price lunch  
7 enrollment information and the department of ((early-learning))  
8 children, youth, and families for child care subsidy program  
9 enrollment information.

10 (7) The authority shall take action to increase the number of  
11 primary care physicians providing dental disease preventive services  
12 including oral health screenings, risk assessment, family education,  
13 the application of fluoride varnish, and referral to a dentist as  
14 needed.

15 (8) The department shall monitor the rates of substitution  
16 between private-sector health care coverage and the coverage provided  
17 under this section.

18 NEW SECTION. **Sec. 3.** This act is necessary for the immediate  
19 preservation of the public peace, health, or safety, or support of  
20 the state government and its existing public institutions, and takes  
21 effect immediately.

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