
Health Care & Wellness Committee

HB 1697

Brief Description: Concerning health coverage for young adults.

Sponsors: Representatives Macri, Lekanoff, Thai, Jenkins, Dolan, Robinson, Pettigrew, Peterson, Stonier, Valdez, Ortiz-Self, Wylie, Doglio, Riccelli, Santos, Appleton, Ryu, Stanford, Bergquist, Goodman, Pollet, Gregerson and Frame.

<p>Brief Summary of Bill</p> <ul style="list-style-type: none">• Establishes a state health coverage program for certain adults under the age of 26.

Hearing Date: 1/14/20

Staff: Jim Morishima (786-7191).

Background:

Medicaid is a program administered jointly by the federal and state governments to provide health coverage to low-income individuals. Washington's Medicaid program is known as Apple Health. A United States citizen is eligible for the Medicaid program if he or she is between the ages of 19 and 64, has a modified adjusted gross income of 133 percent of the federal poverty level or less, and is ineligible for Medicare.

Certain categories of qualified non-citizens are eligible for Medicaid with a five-year waiting period, including lawful permanent residents and green card holders. Some non-citizens are exempt from the five-year waiting period, including refugees and persons with asylum status. In addition, non-citizens who are ineligible for Medicaid may qualify for coverage for emergency medical conditions, cancer treatment, dialysis, anti-rejection treatment for organ transplants, long-term care services, and pregnancy and family planning services.

Summary of Bill:

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

The Health Care Authority (HCA) must provide the same health care coverage provided for individuals eligible for categorically needy medical assistance (Medicaid) to individuals who:

- are at least 19 years old and no older than 26 years old;
- have countable incomes at or below 133 percent of the federal poverty level, adjusted for family size and determined annually by the federal Department of Health and Human Services;
- are not incarcerated; and
- are ineligible for categorically needy medical assistance.

The HCA must assure a seamless transition in coverage for individuals aging out of children's health coverage and use the same eligibility redetermination and appeals procedures as used for children's health coverage. The HCA must manage its application and renewal procedures to maximize enrollment of eligible individuals.

The HCA must seek available federal funding to defray the costs of the program.

Appropriation: None.

Fiscal Note: Requested on January 7, 2020.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.