E2SSB 5580 - S AMD 473 By Senator Muzzall

## ADOPTED 01/17/2024

1 Strike everything after the enacting clause and insert the 2 following:

3 "<u>NEW SECTION.</u> Sec. 1. A new section is added to chapter 74.09 4 RCW to read as follows:

5 (1) By no later than January 1, 2025, the authority shall create 6 a postdelivery and transitional care program that allows for extended 7 postdelivery hospital care for people with a substance use disorder 8 at the time of delivery. The authority shall:

9 (a) Allow for up to five additional days of hospitalization stay 10 for the birth parent;

(b) Provide the birth parent access to integrated care and medical services including, but not limited to, access to clinical health, medication management, behavioral health, addiction medicine, specialty consultations, and psychiatric providers;

(c) Provide the birth parent access to social work support which includes coordination with the department of children, youth, and families to develop a plan for safe care;

(d) Allow dedicated time for health professionals to assist in facilitating early bonding between the birth parent and infant by helping the birth parent recognize and respond to their infant's cues; and

(e) Establish provider requirements and pay only those qualifiedproviders for the services provided through the program.

24 (2) In administering the program, the authority shall seek any 25 financial participation under available federal the medical assistance program, as codified at Title XIX of the federal social 26 27 security act, the state children's health insurance program, as 28 codified at Title XXI of the federal social security act, and any 29 other federal funding sources that are now available or may become available. 30

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<u>NEW SECTION.</u> Sec. 2. A new section is added to chapter 74.09
 RCW to read as follows:

3 (1) Subject to the amounts appropriated for this specific 4 purpose, the authority shall update the maternity support services 5 program to address perinatal outcomes and increase equity and 6 healthier birth outcomes. By January 1, 2025, the authority shall:

7 (a) Update current screening tools to be culturally relevant,
8 include current risk factors, ensure the tools address health equity,
9 and include questions identifying various social determinants of
10 health that impact a healthy birth outcome and improve health equity;

(b) Ensure care coordination, including sharing screening tools with the patient's health care providers as necessary;

13 (c) Develop a mechanism to collect the results of the maternity 14 support services screenings and evaluate the outcomes of the program. 15 At minimum, the program evaluation shall:

16 (i) Identify gaps, strengths, and weaknesses of the program; and

17 (ii) Make recommendations for how the program may improve to 18 better align with the authority's maternal and infant health 19 initiatives; and

20 (d) Increase the allowable benefit and reimbursement rates with 21 the goal of increasing utilization of services to all eligible 22 maternity support services clients who choose to receive the 23 services.

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(2) The authority shall adopt rules to implement this section.

25 <u>NEW SECTION.</u> Sec. 3. A new section is added to chapter 74.09 26 RCW to read as follows:

By November 1, 2024, the income standards for a pregnant person eligible for Washington apple health pregnancy coverage shall have countable income equal to or below 210 percent of the federal poverty level.

31 Sec. 4. RCW 74.09.830 and 2021 c 90 s 2 are each amended to read 32 as follows:

(1) The authority shall extend health care coverage from 60 days postpartum to one year postpartum for pregnant or postpartum persons who, on or after the expiration date of the federal public health emergency declaration related to COVID-19, are receiving postpartum coverage provided under this chapter.

38 (2) By June 1, 2022, the authority must:

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1 (a) Provide health care coverage to postpartum persons who reside 2 in Washington state, have countable income equal to or below 193 3 percent of the federal poverty level, and are not otherwise eligible 4 under Title XIX or Title XXI of the federal social security act; and

5 (b) Ensure all persons approved for pregnancy or postpartum 6 coverage at any time are continuously eligible for postpartum 7 coverage for 12 months after the pregnancy ends regardless of whether 8 they experience a change in income during the period of eligibility.

9 (3) <u>By November 1, 2024, the income standards for a postpartum</u> 10 <u>person eligible for Washington apple health pregnancy or postpartum</u> 11 <u>coverage shall have countable income equal to or below 210 percent of</u> 12 <u>the federal poverty level.</u>

13 <u>(4)</u> Health care coverage under this section must be provided 14 during the 12-month period beginning on the last day of the 15 pregnancy.

16 (((-4))) (5) The authority shall not provide health care coverage 17 under this section to individuals who are eligible to receive health care coverage under Title XIX or Title XXI of the federal social 18 19 security act. Health care coverage for these individuals shall be provided by a program that is funded by Title XIX or Title XXI of the 20 21 federal social security act. Further, the authority shall make every effort to expedite and complete eligibility determinations for 22 individuals who are presumptively eligible to receive health care 23 coverage under Title XIX or Title XXI of the federal social security 24 25 act to ensure the state is receiving the maximum federal match. This includes, but is not limited to, working with the managed care 26 organizations to provide continuous outreach in various modalities 27 28 until the individual's eligibility determination is completed. Beginning January 1, 2022, the authority must submit guarterly 29 reports to the caseload forecast work group on the number of 30 31 individuals who are presumptively eligible to receive health care 32 coverage under Title XIX or Title XXI of the federal social security act but are awaiting for the authority to complete eligibility 33 determination, the number of individuals who were presumptively 34 eligible but are now receiving health care coverage with the maximum 35 federal match under Title XIX or Title XXI of the federal social 36 security act, and outreach activities including the work with managed 37 38 care organizations.

39 ((<del>(5)</del>)) <u>(6)</u> To ensure continuity of care and maximize the 40 efficiency of the program, the amount and scope of health care Code Rev/MW:lel 3 S-3955.2/24 2nd draft 1 services provided to individuals under this section must be the same 2 as that provided to pregnant and postpartum persons under medical 3 assistance, as defined in RCW 74.09.520.

((-(6))) (7) In administering this program, the authority must 4 seek any available federal financial participation under the medical 5 6 assistance program, as codified at Title XIX of the federal social security act, the state children's health insurance program, 7 as codified at Title XXI of the federal social security act, and any 8 other federal funding sources that are now available or may become 9 available. This includes, but is not limited to, ensuring the state 10 11 is receiving the maximum federal match for individuals who are presumptively eligible to receive health care coverage under Title 12 XIX or Title XXI of the federal social security act by expediting 13 completion of the individual's eligibility determination. 14

((((7))) (8) Working with stakeholder and community organizations 15 16 and the Washington health benefit exchange, the authority must 17 establish a comprehensive community education and outreach campaign to facilitate applications for and enrollment in the program or into 18 a more appropriate program where the state receives maximum federal 19 match. Subject to the availability of amounts appropriated for this 20 21 specific purpose, the education and outreach campaign must provide 22 culturally and linguistically accessible information to facilitate participation in the program, including but not limited to enrollment 23 procedures, program services, and benefit utilization. 24

25 ((<del>(8)</del>)) <u>(9)</u> Beginning January 1, 2022, the managed care 26 organizations contracted with the authority to provide postpartum 27 coverage must annually report to the legislature on their work to 28 improve maternal health for enrollees, including but not limited to 29 postpartum services offered to enrollees, the percentage of enrollees utilizing each postpartum service offered, outreach activities to 30 31 engage enrollees in available postpartum services, and efforts to 32 collect eligibility information for the authority to ensure the enrollee is in the most appropriate program for the state to receive 33 the maximum federal match." 34

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1 On page 1, line 1 of the title, after "outcomes;" strike the 2 remainder of the title and insert "amending RCW 74.09.830; and adding 3 new sections to chapter 74.09 RCW."

EFFECT: Updates an expired date and aligns the timelines for increasing the income eligibility thresholds for pregnant and postpartum Apple Health coverage so that the increased threshold for postpartum coverage also goes into effect November 1, 2024.

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