SECOND ENGROSSED SECOND SUBSTITUTE SENATE BILL 5580

State of Washington 68th Legislature 2023 Regular Session

By Senate Ways & Means (originally sponsored by Senators Muzzall, Cleveland, Braun, Rivers, Warnick, Hasegawa, Kuderer, Lovelett, Randall, Shewmake, and J. Wilson)

READ FIRST TIME 02/24/23.

1 AN ACT Relating to improving maternal health outcomes; amending 2 RCW 74.09.830; and adding new sections to chapter 74.09 RCW.

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

4 <u>NEW SECTION.</u> Sec. 1. A new section is added to chapter 74.09 5 RCW to read as follows:

6 (1) By no later than January 1, 2025, the authority shall create 7 a postdelivery and transitional care program that allows for extended 8 postdelivery hospital care for people with a substance use disorder 9 at the time of delivery. The authority shall:

(a) Allow for up to five additional days of hospitalization stayfor 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 infacilitating early bonding between the birth parent and infant by

1 helping the birth parent recognize and respond to their infant's 2 cues; and

3 (e) Establish provider requirements and pay only those qualified4 providers for the services provided through the program.

5 (2) In administering the program, the authority shall seek any 6 available federal financial participation under the medical 7 assistance program, as codified at Title XIX of the federal social 8 security act, the state children's health insurance program, as 9 codified at Title XXI of the federal social security act, and any 10 other federal funding sources that are now available or may become 11 available.

12 <u>NEW SECTION.</u> Sec. 2. A new section is added to chapter 74.09 13 RCW to read as follows:

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

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

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

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

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

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

31 (d) Increase the allowable benefit and reimbursement rates with 32 the goal of increasing utilization of services to all eligible 33 maternity support services clients who choose to receive the 34 services.

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

36 <u>NEW SECTION.</u> Sec. 3. A new section is added to chapter 74.09 37 RCW to read as follows:

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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.

5 Sec. 4. RCW 74.09.830 and 2021 c 90 s 2 are each amended to read 6 as follows:

7 (1) The authority shall extend health care coverage from 60 days 8 postpartum to one year postpartum for pregnant or postpartum persons 9 who, on or after the expiration date of the federal public health 10 emergency declaration related to COVID-19, are receiving postpartum 11 coverage provided under this chapter.

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

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

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

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

25 <u>(4)</u> Health care coverage under this section must be provided 26 during the 12-month period beginning on the last day of the 27 pregnancy.

28 ((-(4))) (5) The authority shall not provide health care coverage under this section to individuals who are eligible to receive health 29 30 care coverage under Title XIX or Title XXI of the federal social 31 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 32 federal social security act. Further, the authority shall make every 33 effort to expedite and complete eligibility determinations for 34 individuals who are presumptively eligible to receive health care 35 coverage under Title XIX or Title XXI of the federal social security 36 act to ensure the state is receiving the maximum federal match. This 37 38 includes, but is not limited to, working with the managed care organizations to provide continuous outreach in various modalities 39

until the individual's eligibility determination is completed. 1 Beginning January 1, 2022, the authority must submit quarterly 2 reports to the caseload forecast work group on the number of 3 individuals who are presumptively eligible to receive health care 4 coverage under Title XIX or Title XXI of the federal social security 5 6 act but are awaiting for the authority to complete eligibility determination, the number of individuals who were presumptively 7 eligible but are now receiving health care coverage with the maximum 8 federal match under Title XIX or Title XXI of the federal social 9 security act, and outreach activities including the work with managed 10 11 care organizations.

12 (((5))) <u>(6)</u> To ensure continuity of care and maximize the 13 efficiency of the program, the amount and scope of health care 14 services provided to individuals under this section must be the same 15 as that provided to pregnant and postpartum persons under medical 16 assistance, as defined in RCW 74.09.520.

((-(6))) (7) In administering this program, the authority must 17 seek any available federal financial participation under the medical 18 19 assistance program, as codified at Title XIX of the federal social security act, the state children's health insurance program, as 20 21 codified at Title XXI of the federal social security act, and any 22 other federal funding sources that are now available or may become 23 available. This includes, but is not limited to, ensuring the state is receiving the maximum federal match for individuals who are 24 25 presumptively eligible to receive health care coverage under Title XIX or Title XXI of the federal social security act by expediting 26 27 completion of the individual's eligibility determination.

28 ((((7))) (8) Working with stakeholder and community organizations and the Washington health benefit exchange, the authority must 29 establish a comprehensive community education and outreach campaign 30 31 to facilitate applications for and enrollment in the program or into 32 a more appropriate program where the state receives maximum federal match. Subject to the availability of amounts appropriated for this 33 specific purpose, the education and outreach campaign must provide 34 culturally and linguistically accessible information to facilitate 35 participation in the program, including but not limited to enrollment 36 procedures, program services, and benefit utilization. 37

38 (((8))) <u>(9)</u> Beginning January 1, 2022, the managed care 39 organizations contracted with the authority to provide postpartum 40 coverage must annually report to the legislature on their work to

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1 improve maternal health for enrollees, including but not limited to 2 postpartum services offered to enrollees, the percentage of enrollees 3 utilizing each postpartum service offered, outreach activities to 4 engage enrollees in available postpartum services, and efforts to 5 collect eligibility information for the authority to ensure the 6 enrollee is in the most appropriate program for the state to receive 7 the maximum federal match.

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