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**SENATE BILL 5580**

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**State of Washington**

**68th Legislature**

**2023 Regular Session**

**By** Senators Muzzall, Cleveland, Braun, Rivers, Warnick, Hasegawa, Kuderer, Lovelett, Randall, Shewmake, and J. Wilson

Read first time 01/26/23. Referred to Committee on Health & Long Term Care.

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

6 (1) By January 1, 2024, the authority shall create a postdelivery  
7 and transitional care program that allows for extended postdelivery  
8 hospital care for women with a substance use disorder at the time of  
9 delivery. The authority shall:

10 (a) Allow for at least five additional days of hospitalization  
11 stay for the birth parent;

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

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

19 (d) Allow dedicated time for health professionals to assist in  
20 facilitating 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 qualified  
4 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 NEW SECTION. **Sec. 2.** A new section is added to chapter 74.09  
13 RCW to read as follows:

14 (1) The authority shall update the maternity support services  
15 program to address perinatal outcomes and increase equity and  
16 healthier birth outcomes.

17 (2) By January 1, 2024, the authority shall:

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

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

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

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

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

31 (d) Increase utilization of services to all eligible maternity  
32 support services clients who choose to receive the services.

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

34 NEW SECTION. **Sec. 3.** A new section is added to chapter 74.09  
35 RCW to read as follows:

36 The income standards for a pregnant woman eligible for Washington  
37 apple health pregnancy coverage shall have countable income equal to  
38 or below 210 percent of the federal poverty level.

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

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

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

9       (a) Provide health care coverage to postpartum persons who reside  
10 in Washington state, have countable income equal to or below (~~(193)~~)  
11 210 percent of the federal poverty level, and are not otherwise  
12 eligible under Title XIX or Title XXI of the federal social security  
13 act; and

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

18       (3) Health care coverage under this section must be provided  
19 during the 12-month period beginning on the last day of the  
20 pregnancy.

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

1 or Title XXI of the federal social security act, and outreach  
2 activities including the work with managed care organizations.

3 (5) To ensure continuity of care and maximize the efficiency of  
4 the program, the amount and scope of health care services provided to  
5 individuals under this section must be the same as that provided to  
6 pregnant and postpartum persons under medical assistance, as defined  
7 in RCW 74.09.520.

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

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

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

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