

SENATE BILL REPORT

SB 5128

As of January 17, 2025

Title: An act relating to the provision of medical assistance to individuals in juvenile detention facilities.

Brief Description: Concerning the provision of medical assistance to individuals in juvenile detention facilities.

Sponsors: Senators Wilson, C., Hasegawa, Nobles, Saldaña, Valdez and Wellman.

Brief History:

Committee Activity: Human Services: 1/20/25.

Brief Summary of Bill

- Clarifies that confinement facilities operated by the Department of Children, Youth, and Families (DCYF) and county juvenile detention facilities are included in Medicaid suspension and reinstatement requirements.
- Alters the definition of correctional institution to remove county juvenile detention facilities and facilities operated by DCYF.
- Requires the Health Care Authority to collaborate with certain entities to implement federal law requiring provision of certain services to eligible juveniles before and after release from confinement.

SENATE COMMITTEE ON HUMAN SERVICES

Staff: Kelsey-anne Fung (786-7479)

Background: Suspension and Reinstatement of Medicaid Benefits. The Health Care Authority (HCA) provides medical care services to eligible low-income state residents and their families, primarily through the Medicaid program. The State Medicaid Plan is an

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agreement between the state and federal government controlling expenditures of Medicaid funds. Federal standards for the Medicaid program exclude payments for care or services for any person who is an inmate of a public institution, or patient at an institution for mental disease. Historically, HCA maintained a policy of allowing Medicaid status to remain unchanged up to 30 days while in confinement, after which point the person's Medicaid enrollment would be terminated.

State law requires HCA to suspend, rather than terminate, medical assistance for persons who have been incarcerated or committed to a state hospital, including other confinement settings in which federal financial participation is disallowed such as juvenile detention facilities, facilities operated by the Department of Children, Youth, and Families (DCYF), and other treatment facilities. A person who was not enrolled in medical assistance prior to confinement must be able to apply for medical assistance in suspense status during confinement, regardless if the person's release date is known. Medical assistance may be reinstated prior to the day of release as long as no federal funds are spent for purposes not authorized by the federal government.

Medicaid Waivers. Section 1115 of the Social Security Act gives the secretary of the Department of Health and Human Services authority to grant waivers from certain Medicaid requirements to allow states to demonstrate innovative approaches in their Medicaid programs. In 2018, Congress enacted the SUPPORT for Patients and Communities Act, which required the secretary to provide guidance on how states may apply for a section 1115 Medicaid waiver allowing them to provide Medicaid services to otherwise eligible persons, including juveniles, who are within 30 days of expected release from incarceration.

In 2021, state legislation was passed requiring HCA to apply for a waiver to allow the state to provide medical services to persons confined in a correctional institution, including juvenile detention centers and facilities operated by DCYF, state hospital, or other treatment facility for up to 30 days prior to the person's release or discharge for the purpose of creating continuity of care and providing reentry services. The legislation also requires HCA to collaborate with certain agencies and entities to establish procedures for coordination between HCA and confinement facilities that result in prompt reinstatement of eligibility and speedy eligibility determinations upon release from confinement.

In June 2023, Washington State's section 1115 waiver was approved by the federal government, allowing coverage of certain prerelease services for Medicaid eligible individuals in confinement settings up to 90 days before their release. This is known as HCA's Reentry Initiative, and HCA is currently working with carceral facilities on implementation. HCA requires participating facilities to support three targeted prerelease services: case management, medications for alcohol and opioid use disorder, and provision of a 30-day supply of medications and medical supplies at release. Optional services include medications during the prerelease period, lab and radiology, services by community health workers with lived experience, and physical and behavioral clinical consultations.

State legislation also passed in 2021 prohibiting the suspension of a person's Medicaid enrollment until after incarceration in a correctional institution for 30 days or more.

Medicaid Services for Juveniles. The federal Consolidated Appropriations Act (CAA) of 2023 includes two provisions impacting the availability of certain state plan services for eligible incarcerated youth in Medicaid and the Children's Health Insurance Program (CHIP). Under section 5121 of the CAA, states must establish an internal operational plan by January 1, 2025, to:

- provide medically necessary screening and diagnostic services in the 30 days prior to release, or not later than one week, or as soon as practical after release; and
- provide targeted case management services, including assessment, development of a care plan, referrals, monitoring, and follow-up to appropriate care and services available in the geographic area of the home residence or community, in the 30 days prior to release and for at least 30 days following release.

Under section 5122, states have the option to provide Medicaid and CHIP coverage to eligible juveniles who are being held pending disposition of charges.

Summary of Bill: Suspension and Reinstatement of Medicaid Benefits. Requirements related to medical assistance suspension and reinstatement for individuals in confinement settings apply to persons confined in institutions or facilities operated by DCYF and individuals confined in a county juvenile detention facility. State law prohibiting suspension of a person's Medicaid enrollment until after incarceration in a correctional institution for 30 days or more applies to persons confined in an institution or facility operated by DCYF or confined in a county juvenile detention facility. County juvenile detention facilities are added to the list of entities with whom HCA must collaborate with to establish procedures for the prompt reinstatement of eligibility and speedy eligibility determinations for medical assistance services upon release from confinement.

Juvenile detention facilities and facilities operated by DCYF are removed from the definition of correctional institution.

Medicaid Services for Juveniles. HCA must collaborate with managed care organizations, DCYF, and juvenile detention facilities to implement section 5121 of the CAA that requires provision of:

- screening and diagnostic services to eligible juveniles in the 30 days prior to release, or not later than one week or as soon as practicable after release; and
- targeted case management services for a minimum of 30 days prior to release and for at least 30 days or as medically necessary following release to connect juveniles with services and providers in the geographic area where the eligible juvenile will be residing upon release, when possible.

HCA must leverage existing resources, development plans, and funding as part of its other medical assistance programs, including the section 1115 waiver approved by the federal

government on June 30, 2023.

By December 1, 2025, HCA must submit a report to the Governor and the Legislature on:

- the status of HCA's operational plan to implement section 5121 of the CAA;
- a summary of HCA's collaboration efforts with managed care organizations, DCYF, and juvenile detention facilities, and identification of any barriers or challenges to providing services to eligible juveniles across the state; and
- the feasibility of providing coverage for optional services under section 5122 of the CAA for the full period of incarceration pending disposition of charges.

Requirements related to implementation and reporting on the CAA expire July 1, 2026.

A federal severability clause is included.

Appropriation: None.

Fiscal Note: Requested on January 3, 2025.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.