S-3549.1			
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SENATE BILL 6659

State of Washington 56th Legislature 2000 Regular Session

By Senators Deccio, Thibaudeau, Gardner, Patterson, Winsley, Prentice, Costa and Kohl-Welles

Read first time 01/21/2000. Referred to Committee on Health & Long-Term Care.

- 1 AN ACT Relating to prescription drug benefits; reenacting and
- 2 amending RCW 74.09.510; and adding a new section 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 RCW 5 to read as follows:
- The department shall apply to the federal health care financing administration for a waiver under section 1115 of the federal social security act to provide medicaid prescription drug benefits to
- 9 qualified persons who are sixty-two years of age or older or who are
- 10 nineteen years of age or older and determined by the department to be
- 11 disabled under the standards of the federal social security program and
- 12 who have household income up to and including one hundred eighty-five
- 13 percent of the federal poverty level. If sufficient funds are not
- 14 appropriated to provide prescription drug coverage under this section
- 15 to all eligible persons with household income up to and including one
- 16 hundred eighty-five percent of the federal poverty level, the
- 17 department shall provide coverage under this section up to the maximum
- 18 income eligibility limit that can be achieved within the funds
- 19 appropriated. The waiver must include the full range of prescription

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- 1 drugs provided under the current medicaid program. It may not include
- 2 an asset limit. Copayments for participants must be comparable to
- 3 copayments in the current medicaid program. Coverage under this
- 4 section must commence July 1, 2001, or as soon thereafter as possible.

5 Sec. 2. RCW 74.09.510 and 1997 c 59 s 14 and 1997 c 58 s 201 are 6 each reenacted and amended to read as follows:

7 Medical assistance may be provided in accordance with eligibility requirements established by the department, as defined in the social 8 9 security Title XIX state plan for mandatory categorically needy persons and: (1) Individuals who would be eligible for cash assistance except 10 for their institutional status; (2) individuals who are under twenty-11 one years of age, who would be eligible for temporary assistance for 12 needy families or medicaid, but do not qualify as dependent children 13 14 and who are in (a) foster care, (b) subsidized adoption, (c) a nursing 15 facility or an intermediate care facility for the mentally retarded, or 16 (d) inpatient psychiatric facilities; (3) the aged, blind, and disabled (a) Receive only a state supplement, or (b) would not be eligible 17 18 for cash assistance if they were not institutionalized; (4) categorically eligible individuals who meet the income and resource 19 requirements of the cash assistance programs; (5) individuals who are 20 enrolled in managed health care systems, who have otherwise lost 21 eligibility for medical assistance, but who have not completed a 22 23 current six-month enrollment in a managed health care system, and who 24 are eligible for federal financial participation under Title XIX of the 25 social security act; (6) children and pregnant women allowed by federal statute for whom funding is appropriated; (7) other individuals 26 eligible for medical services under RCW 74.09.035 ((and)), 74.09.700, 27 and section 1 of this act for whom federal financial participation is 28 29 available under Title XIX of the social security act; and (8) persons 30 allowed by section 1931 of the social security act for whom funding is appropriated. 31

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