

Health Care

HB 1390

Brief Description: Continuing health care benefits for individuals with disabilities.

Sponsors: Representatives Cody, Pflug, Ogden, Edmonds, Lantz, Linville, Tokuda, Kagi, Kenney, McMorris, Van Luven, Cooper, Dickerson, O'Brien, Hunt, Haigh, Conway, Lovick, Keiser, Casada, Morell, Voloria, Miloscia, Simpson, McIntire, Schual-Berke, Ruderman, Esser, Wood, Santos, McDermott and Kessler; by request of Governor Locke.

Brief Summary of Bill

- *Maintains Medicaid coverage for individuals with disabilities who go to work and receive earned income.*

Hearing Date: 2/6/01

Staff: Dave Knutson (786-7146).

Background:

Congress enacted the Ticket to Work and Work Incentives Improvement Act in November 1999. The legislation authorizes individuals with disabilities to use a ticket to work and self-sufficiency to obtain employment services, vocational rehabilitation services, or other support services from an employment network of the individual's choice. The legislation also gives the state greater flexibility in removing barriers to employment for individuals with disabilities. States are given the option to modify Medicaid income and resource limits for individuals with disabilities who are earning an income. States may also allow working individuals with disabilities to buy into Medicaid even though they are no longer eligible for federal disability benefits.

Summary of Bill:

The Department of Social and Health Services will continue Medicaid coverage for individuals with disabilities who go to work. The department will establish earned income disregards, cost sharing, and a schedule of premiums that eliminate disincentives to work.

The department will also participate in the development of a ticket to work program that allows individuals with disabilities to choose their provider of vocational rehabilitation services, employment services, and other support services.

Recipients of general assistance or the alcohol drug assistance and treatment act who lose their eligibility due to employment may continue to receive medical care services for up to 12 months.

Appropriation: *None.*

Fiscal Note: *Requested on February 1, 2001.*

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