Washington State House of Representatives Office of Program Research

BILL ANALYSIS

Appropriations Committee

HB 2022

Brief Description: Concerning dispensing contraceptive drugs for medicaid enrollees.

Sponsors: Representatives Jinkins, Morrell, Green, Cody, Hunter, Ryu, Appleton, Pollet and Roberts.

Brief Summary of Bill

- Directs the Health Care Authority to require dispensing of contraceptive drugs with up to a one-year supply provided at one time.
- Requires contracts with managed care plans to allow on-site dispensing of prescribed contraceptive drugs at family planning clinics.
- Requires dispensing practices for contraceptive drugs to follow clinical guidelines.

Hearing Date: 4/5/13

Staff: Erik Cornellier (786-7116).

Background:

Medicaid is a federal-state program that provides health care services to specified categories of low-income individuals pursuant to federal standards. Family planning services, including contraception, are covered under Medicaid. The federal government provides a 90 percent match rate for family planning services. States may request waivers from federal requirements for experimental, pilot, or demonstration projects.

Through the Take Charge waiver, the Health Care Authority (HCA) provides coverage for family planning services to state residents with family incomes below 250 percent of the federal poverty level (FPL). Services include an annual gynecological exam and pap smear, birth control pills and devices, emergency contraception, and sterilization. Pregnancy termination is not a covered service. Services are delivered by a variety of local contractors, including county health departments, community clinics, and non-profit organizations. Approximately 34,000 people per month are enrolled in Take Charge at an annual cost of \$12.8 million.

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Under the HCA's rules, prescription contraceptives are covered when dispensed in at least a three-month supply unless otherwise directed by the prescriber.

Summary of Bill:

The Legislature finds that:

- a significant percentage of pregnancies are unintended and could be averted with broader access to health care and effective contraception;
- providing broader access to contraceptives for women covered by Medicaid programs could avert up to 26 percent of unintended pregnancies and result in an estimated \$4 million in savings for health care programs; and
- research suggests that moving from 28 day dispensing of contraceptive drugs to one-year dispensing improves adherence to maintenance drugs and effective use of prescribed contraceptives.

The Legislature intends to require the HCA and all Medicaid programs to require dispensing of contraceptive drugs with up to a one-year supply provided at one time.

The HCA must require dispensing of contraceptive drugs with up to a one-year supply provided at one time for all Medicaid programs offered through managed care plans or on a fee-for-service basis.

Contracts with managed care plans must allow on-site dispensing of prescribed contraceptive drugs at family planning clinics.

Dispensing practices must follow clinical guidelines for appropriate prescribing and dispensing to ensure the health of the patient while maximizing access to effective contraceptive drugs.

Appropriation: None.

Fiscal Note: Requested on April 1, 2013.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.