

FINAL BILL REPORT

2SSB 5213

C 261 L 13
Synopsis as Enacted

Brief Description: Concerning medication management services for medicaid managed care enrollees.

Sponsors: Senate Committee on Ways & Means (originally sponsored by Senators Becker, Tom, Bailey, Honeyford and Frockt).

Senate Committee on Health Care
Senate Committee on Ways & Means
House Committee on Health Care & Wellness
House Committee on Appropriations

Background: For fiscal year 2013, 63 percent, or approximately 780,000 of the 1.2 million Medicaid enrollees are forecasted to be enrolled in managed care. The Health Care Authority (HCA) estimates that 40,000 or 5 percent of enrollees in managed care have five or more prescriptions.

Under state law, HCA must adopt a uniform procedure to enter into contractual agreements with managed care plans. These procedures must follow certain provisions including provider reimbursement methods that incentivize chronic care management within health homes.

Summary: The Legislature finds that chronic care management, including comprehensive medication management services, provided by licensed pharmacists and qualified providers is a critical component in the treatment of chronic diseases to improve the quality of care and reduce overall cost in the treatment of disease.

By January 1, 2015, HCA contracts for Medicaid-managed care plans must include a requirement that incentivizes the health homes to include comprehensive medication management services for patients with multiple chronic conditions. The provider reimbursement methods should incentivize pharmacists or other qualified providers licensed in Washington to provide comprehensive medication management services.

The managed care contracts must also include evaluation and reporting on the impact of comprehensive medication management services on patient clinical outcomes and total health care costs, including reductions in emergency department utilization, hospitalization, and drug costs.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

The provisions in the contracts must not add to the rates paid for the Medicaid-managed care contracts.

Votes on Final Passage:

Senate	49	0	
House	96	0	(House amended)
House	97	0	(House receded/amended)
Senate	47	0	(Senate concurred)

Effective: July 28, 2013.