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ENGROSSED SUBSTITUTE HOUSE BILL 2594

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State of Washington

63rd Legislature

2014 Regular Session

**By** House Appropriations (originally sponsored by Representatives Riccelli, Jinkins, Cody, Moscoso, Morrell, Fitzgibbon, Ryu, Tarleton, Farrell, Van De Wege, Robinson, Habib, Ormsby, Tharinger, Freeman, Walkinshaw, Hudgins, Gregerson, Pettigrew, Reykdal, Roberts, Carlyle, Moeller, Stanford, Goodman, Seaquist, Appleton, Clibborn, Bergquist, Kagi, Sells, Pollet, and Green)

READ FIRST TIME 02/11/14.

1       AN ACT Relating to developing and authorizing the federal basic  
2 health program; adding a new section to chapter 70.47 RCW; and creating  
3 a new section.

4       BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5       NEW SECTION.   **Sec. 1.** (1) The federal patient protection and  
6 affordable care act, section 1331 of P.L. 111-148 of 2010, provides  
7 states the option to establish a federal basic health program for  
8 individuals with incomes up to two hundred percent of the federal  
9 poverty level who are not eligible for coverage under medicaid. States  
10 electing to operate a basic health program may receive federal funding  
11 equal to ninety-five percent of the amount of the premium tax credits  
12 and cost-sharing reductions that would have been available had the  
13 eligible individual obtained coverage through the exchange.

14       (2) The United States department of health and human services has  
15 proposed regulations for the development of the basic health program,  
16 including the development of a basic health blueprint for certification  
17 by the centers for medicare and medicaid services that will grant  
18 states operational authority for the program.

1        NEW SECTION.   **Sec. 2.**   A new section is added to chapter 70.47 RCW  
2   to read as follows:

3        The health care authority must begin the necessary econometric  
4   modeling to analyze the program enrollment, and the costs and impacts  
5   to the state, the enrollees, health care provider and facility  
6   reimbursement, and the insurance marketplace.   By December 31, 2014,  
7   the authority shall publish a report on the findings of the econometric  
8   modeling.   The report shall include impacts on:

9        (1) Reimbursement levels affecting provider participation and its  
10   relationship to network adequacy in the program;

11        (2) The financial stability of the Washington health benefit  
12   exchange, including enrollment, risk profile, and fees for operational  
13   sustainability; and

14        (3) Continuity of care, access, and affordability of coverage for  
15   potential enrollees in the federal basic health program compared to the  
16   insurance marketplace.

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