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HOUSE BILL 1669

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State of Washington

64th Legislature

2015 Regular Session

By Representatives Riccelli, Harris, Cody, Tharinger, Van De Wege, Jinkins, Sawyer, Moeller, and S. Hunt

Read first time 01/26/15. Referred to Committee on Health Care & Wellness.

1 AN ACT Relating to continuity of health care coverage; adding a  
2 new section to chapter 74.09 RCW; creating a new section; and  
3 providing an expiration date.

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

5 NEW SECTION. **Sec. 1.** A new section is added to chapter 74.09  
6 RCW to read as follows:

7 (1)(a) A task force on continuity of health coverage and care is  
8 established with the following members:

9 (i) The governor shall appoint members representing:

10 (A) Patients;

11 (B) Consumer advocates;

12 (C) Labor unions;

13 (D) Business interests;

14 (E) Health plans that participate in the medicaid program;

15 (F) Health plans that offer coverage in the commercial insurance  
16 market;

17 (G) Health care providers;

18 (H) Hospitals;

19 (I) The Washington health benefit exchange;

20 (J) The Washington state health care authority;

1 (K) The Washington state department of social and health  
2 services; and

3 (L) The Washington state office of the insurance commissioner.

4 (ii) The governor shall invite the participation of  
5 representatives of tribes and urban Indian health providers in  
6 Washington state to serve as members of the task force.

7 (b) The governor shall convene the initial meeting of the task  
8 force. The task force shall choose its chair from among its  
9 membership.

10 (c) Meetings of the task force shall be open to the public and  
11 shall provide an opportunity for public comment.

12 (2) The task force shall review and analyze data and identify  
13 options and strategies in regards to:

14 (a) Easing transitions between different types of health  
15 insurance coverage and plans, including employer-sponsored insurance,  
16 individual insurance, and public programs;

17 (b) Identifying the assistance necessary to help enrollees when  
18 they transition between health insurance plans or lose eligibility  
19 for coverage;

20 (c) Identifying options to reduce financial and eligibility  
21 barriers to obtaining and maintaining coverage; and

22 (d) Establishing accountability and coordination among state  
23 agencies and the Washington health benefit exchange.

24 (3) Staff support for the task force shall be provided by the  
25 office of financial management.

26 (4) Members of the task force, except those representing an  
27 employer or organization, are entitled to be reimbursed for travel  
28 expenses in accordance with RCW 43.03.050 and 43.03.060.

29 (5) The task force shall report its preliminary findings and  
30 recommendations to the governor and the appropriate committees of the  
31 legislature by December 1, 2015, and a final report must be submitted  
32 by December 1, 2016. The final report shall address the task force's  
33 conclusions related to the items considered in subsection (2) of this  
34 section, as informed by the results of the study in section 2 of this  
35 act.

36 (6) This section expires June 30, 2017.

37 NEW SECTION. **Sec. 2.** The office of financial management shall  
38 contract for a study of the affordability and availability of health  
39 care coverage for Washington residents to be completed by March 1,

1 2016, and submitted to the governor, the legislature, and the task  
2 force on continuity of health coverage and care established in  
3 section 1 of this act. The study shall evaluate:

4 (1) The availability and affordability of health coverage options  
5 for Washington residents;

6 (2) The rates at which residents could transition between health  
7 insurance programs and discontinue coverage due to fluctuations in  
8 income and circumstances;

9 (3) Options for improving affordability for low-income residents  
10 through a microsimulation model that fully takes into account all  
11 relevant eligibility factors, including unaccepted offers of  
12 employer-sponsored insurance, and through an analysis of state budget  
13 offsets; and

14 (4) The potential for improved health coverage to result in  
15 savings for the state budget.

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