

SENATE BILL REPORT

SB 6304

As Reported by Senate Committee On:
Health & Long Term Care, January 25, 2018

Title: An act relating to continuing access to medicaid services.

Brief Description: Continuing access to medicaid services.

Sponsors: Senators Frockt, Rivers, Saldaña, Hobbs, Cleveland, Rolfes, Keiser, Conway, Hasegawa, Billig, Walsh, Fain, Kuderer, Chase, Hunt and Palumbo.

Brief History:

Committee Activity: Health & Long Term Care: 1/18/18, 1/25/18 [DP-WM, DNP, w/oRec].

Brief Summary of Bill

- Aligns the income eligibility standards for the Apple Health for Kids program (Program) with the current federal standards.
- Removes requirements that funds must be specifically appropriated for the Program.

SENATE COMMITTEE ON HEALTH & LONG TERM CARE

Majority Report: Do pass and be referred to Committee on Ways & Means.

Signed by Senators Cleveland, Chair; Kuderer, Vice Chair; Conway, Keiser, Mullet and Van De Wege.

Minority Report: Do not pass.

Signed by Senators Rivers, Ranking Member; Bailey and Becker.

Minority Report: That it be referred without recommendation.

Signed by Senator Fain.

Staff: LeighBeth Merrick (786-7445)

Background: The Children's Health Insurance Program (CHIP) is a program administered by the United States Department of Health and Human Services that provides matching funds

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.

to states for providing health insurance to families with children. CHIP was established in 1997 and was designed to cover uninsured children in families with incomes that are modest yet too high to qualify for Medicaid.

Under the Affordable Care Act, the income eligibility for CHIP is calculated using modified adjusted gross income (MAGI). In October 2013, the Health Care Authority began implementing the MAGI methodology for the state's Program which expanded the maximum income eligibility for children to 312 percent of the federal poverty level (FPL) and to 193 percent of the FPL for pregnant women.

Based on income, the state requires that some families pay a monthly premium for their program coverage. Under the state's MAGI implementation, families whose income is greater than 210 percent of the FPL are required to pay a monthly premium.

The Legislature requires that Program funds for children whose family income is not greater than 300 percent of the FPL be specifically appropriated. Currently, these funds are appropriated annually at a maintenance level.

Summary of Bill: Pregnant women who are residents of Washington State and whose income is no greater than 193 percent of the FPL are eligible for the Program.

Children under age 19, who are Washington State residents, and whose family income is no greater than 312 percent of the FPL are eligible for the Program.

Families whose income is greater than 210 percent of the FPL must pay a monthly premium for the Program coverage.

For families whose income is greater than 260 percent of the FPL, the program premium is established in consultation with the Senate majority and minority leaders and the Speaker and minority leaders of the House of Representatives.

The requirement that funds be specifically appropriated for children whose family income is not greater than 300 percent of the FPL is removed.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: The bill contains an emergency clause and takes effect immediately.

Staff Summary of Public Testimony: PRO: This bill would codify current practice. Ninety-seven percent of Washington children have health insurance coverage and it is critical that their access to these services be protected. There is bi-partisan support for this issue and this bill shows that the state is committed to investing in children's health care. Health care for children and families is essential so that children can learn and have successful futures. Children's health care provides preventative care. When children and families don't have this

preventative care they are at greater risk for poor health outcomes and increased health care spending.

Persons Testifying: PRO: Senator David Frockt, Prime Sponsor; Litonya Lester, Children's Alliance; Lizzy Boyer, citizen; Dr. Beth Ebel, Washington Chapter of the American Academy of Pediatrics; Neva Gerke, President, Midwives Association of Washington State; Carrie Glover, WithinReach.

Persons Signed In To Testify But Not Testifying: No one.