
Appropriations Committee

E2SSB 6128

Brief Description: Extending coverage during the postpartum period.

Sponsors: Senate Committee on Ways & Means (originally sponsored by Senators Randall, Darnelle, Dhingra, Frockt, Hasegawa, Hunt, Kuderer, Lovelett, Salomon, Stanford, Van De Wege, Nguyen and Wilson, C.).

Brief Summary of Engrossed Second Substitute Bill

- Requires the Health Care Authority to expand health care coverage to pregnant and postpartum persons from 60 days post pregnancy to 12 months post pregnancy, based on income eligibility that is phased into 193 percent of the federal poverty level (FPL).

Hearing Date: 2/29/20

Staff: Meghan Morris (786-7119).

Background:

Medicaid is a program administered jointly by the federal and state governments to provide health coverage to low-income individuals. Washington's Medicaid program is known as Apple Health, which offers eligible families, children under age 19, low-income adults, certain disabled individuals, and pregnant women a complete medical benefits package.

Apple Health provides coverage to pregnant individuals with countable income at or below 193 percent of the federal poverty level (FPL), regardless of citizenship or immigration status. Once an individual is enrolled, they are covered regardless of any change in income through the end of the month, following the sixtieth day after the pregnancy end date.

The 2016 Legislature established The Maternal Mortality Review Panel (Panel) to review and identify factors associated with maternal deaths occurring in the state, and to make recommendations to improve healthcare for women. The Panel's 2019 report to the Legislature

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included a recommendation to ensure funding for and access to postpartum care and support for 12 months after the end of pregnancy.

Summary of Bill:

Beginning January 1, 2021, the Health Care Authority (HCA) must provide health care coverage to pregnant and postpartum persons up to 12 months post pregnancy based on income eligibility that is phased in as follows:

- For state fiscal year 2021, the individual's countable income must be less than or equal to 150 percent FPL;
- For state fiscal year 2022, the individual's countable income must be less than or equal to 165 percent FPL;
- For state fiscal year 2023, the individual's countable income must be less than or equal to 180 percent FPL; and
- For state fiscal year 2024, the individual's countable income must be less than or equal to 193 percent FPL.

The HCA must seek any available federal financial participation or other funding sources. Once eligible for federal financial participation, the state-only program expires, and the HCA must provide health care coverage up to 12 months post pregnancy to pregnant and postpartum persons with a countable income at or below 193 percent of the FPL.

The HCA must submit a waiver request to the Centers for Medicare and Medicaid Services to allow for the state to receive federal financial participation for the coverage period past 60 days to one year post-pregnancy, and report to the Legislature on the status of the waiver request by January 1, 2021.

Appropriation: None.

Fiscal Note: Available.

Effective Date: This bill takes effect 90 days after adjournment of the session in which the bill is passed, except for section 3, relating to post partum coverage, which takes effect upon state eligibility for certain additional federal financial participation.