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**HOUSE BILL 1185**

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**State of Washington**

**66th Legislature**

**2019 Regular Session**

**By** Representatives Stonier, Harris, Wylie, Ryu, Caldier, Dolan, Ortiz-Self, Thai, Doglio, Frame, Walen, and Stanford

Read first time 01/16/19. Referred to Committee on Appropriations.

1 AN ACT Relating to assuring access to health care services for  
2 medicaid beneficiaries by applying the medicare rate floor to health  
3 care services furnished under medicaid by health care providers;  
4 adding a new section to chapter 74.09 RCW; and creating a new  
5 section.

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

7 NEW SECTION. **Sec. 1.** The legislature finds as follows:

8 (1) Access to health care services is essential to assure quality  
9 of life and lower health care costs for Washingtonians.

10 (2) In particular, access for medicaid patients to primary care  
11 services is critical for coordinating care, including specialty care,  
12 assuring continuity of care, as well as providing necessary  
13 preventive care, which improves overall health and can reduce health  
14 care costs and emergency room admissions.

15 (3) The availability of primary care is particularly important  
16 for medicaid beneficiaries, in order to establish a regular source of  
17 care and to provide services to a group that is more prone to chronic  
18 health conditions that can be appropriately managed by primary care  
19 physicians.

20 (4) Beyond primary care, medicaid beneficiaries require services  
21 from a broad range of health care providers to meet their physical

1 and behavioral health needs. The trend toward integrating health  
2 services demands that the medicaid program be able to incentivize  
3 participation by various categories of health care providers.

4 (5) In Washington, medicaid provides coverage for over one  
5 million eight hundred thousand people, including forty-five percent  
6 of Washington's children. Without medicaid coverage, many enrollees  
7 would be uninsured or lack coverage for services they need.

8 (6) Historically, inadequate provider reimbursement rates have  
9 proven to be a barrier to access to care for the medicaid population.  
10 In Washington, medicaid fee-for-service rates are twenty-nine percent  
11 less than medicare rates for the same health care services.

12 (7) A 2014 Washington state primary care medicaid survey found  
13 that more than three-quarters of primary care physicians in  
14 Washington that are not in large health care organizations would stop  
15 or limit their acceptance of new medicaid patients or stop or limit  
16 care for current medicaid patients if the medicaid rate increases  
17 authorized by the federal patient protection and affordable care act  
18 of 2010 were not maintained.

19 (8) According to a study published in 2015 in the New England  
20 Journal of Medicine, higher medicaid payment rates have significantly  
21 increased appointment availability for medicaid enrollees.

22 (9) It is critical that health care providers receive sufficient  
23 reimbursement to participate in medicaid. Applying medicare rates  
24 encourages greater provider participation by primary care physicians  
25 and other categories of health care providers in medicaid, thereby  
26 increasing access to health care services by medicaid beneficiaries,  
27 particularly in underserved areas.

28 NEW SECTION. **Sec. 2.** A new section is added to chapter 74.09  
29 RCW to read as follows:

30 Medicaid payment for health care services furnished by a licensed  
31 health care provider, with either a provider contract with the  
32 authority on a fee-for-service basis or under a contract with a  
33 medicaid managed care organization, must be at a rate not less than  
34 one hundred percent of the payment rate that applies to those  
35 services and providers under medicare.

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