
SECOND SUBSTITUTE SENATE BILL 6128

State of Washington

66th Legislature

2020 Regular Session

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

READ FIRST TIME 02/11/20.

1 AN ACT Relating to improving maternal health outcomes by
2 extending coverage during the postpartum period; adding a new section
3 to chapter 74.09 RCW; creating new sections; providing a contingent
4 effective date; and providing a contingent expiration date.

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

6 NEW SECTION. **Sec. 1.** (1) In Washington and across the country,
7 maternal mortality rates continue to be unacceptably high.
8 Approximately seven hundred people die each year in the United States
9 due to pregnancy-related conditions. The majority of these deaths are
10 preventable.

11 (2) Maternal mortality data reveal significant racial and ethnic
12 disparities. In this state, American Indian and Alaska native women
13 are six to seven times as likely to die from a pregnancy-related
14 cause than white women.

15 (3) The centers for disease control and prevention define the
16 postpartum period as extending one year after the end of pregnancy,
17 and data show that health needs continue during that entire year. In
18 Washington, nearly one-third of all pregnancy-related deaths and the
19 majority of suicides and accidental overdoses occurred between forty-
20 three and three hundred sixty-five days postpartum.

1 (4) The maternal mortality review panel has identified access to
2 health care services and gaps in continuity of care, especially
3 during the postpartum period, as factors that contribute to
4 preventable pregnancy-related deaths. In their October 2019 report to
5 the legislature, the panel recommended ensuring funding and access to
6 postpartum care and support through the first year after pregnancy.

7 (5) Postpartum medicaid coverage currently ends sixty days after
8 pregnancy, creating an unsafe gap in coverage. Continuity of care is
9 critical during this vulnerable time, and uninterrupted health
10 insurance provides birthing parents with access to stable and
11 consistent care. Extending health care coverage through the first
12 year postpartum is one of the best tools for increasing access to
13 care and improving maternal and infant health.

14 (6) The legislature therefore intends to extend health care
15 coverage from sixty days to twelve months postpartum. Nothing in this
16 act is intended to limit eligibility or reduce benefits that are
17 available to pregnant or postpartum persons as of the effective date
18 of this section.

19 NEW SECTION. **Sec. 2.** (1) Beginning January 1, 2021, to the
20 extent of available funds, the authority must provide health care
21 coverage to eligible postpartum persons within the period of time
22 described in subsection (2) of this section. To ensure continuity of
23 care and maximize the efficiency of the program, the amount, scope,
24 and duration of health care services provided to individuals under
25 this section must be the same as that provided to pregnant and
26 postpartum persons under medical assistance, as defined in RCW
27 74.09.520.

28 (2) Health care coverage under this section must be provided:

29 (a) Beginning the first day of the month that follows the month
30 in which the sixty-day postpartum period ends, but in no case earlier
31 than the effective date of this section;

32 (b) Ending the last day of the month in which the twelve-month
33 postpartum period ends; and

34 (c) On a fee-for-service basis.

35 (3) Enrollment in this program may not result in expenditures
36 that exceed the amount that has been appropriated in the omnibus
37 operating appropriations act. If it appears that continued enrollment
38 will result in expenditures exceeding the appropriated level for a
39 particular fiscal year, the authority may freeze new enrollment and

1 establish a waiting list of persons who may receive benefits only
2 when sufficient funds are available.

3 (4) The authority must administer this program in a cost-
4 effective manner so as to serve the greatest number of eligible
5 persons.

6 (5) For purposes of this section, the following terms have the
7 meanings indicated unless the context clearly requires otherwise.

8 (a) "Eligible postpartum persons" means postpartum persons who
9 reside in Washington state, have countable income equal to or below
10 one hundred ninety-three percent of the federal poverty level, and
11 are not otherwise eligible for full scope coverage under Title XIX or
12 Title XXI of the federal social security act.

13 (b) "Postpartum period" means the period of time that begins on
14 the last day of the pregnancy and ends twelve months after the last
15 day of pregnancy.

16 NEW SECTION. **Sec. 3.** A new section is added to chapter 74.09
17 RCW to read as follows:

18 The authority shall provide health care coverage to all
19 postpartum persons who reside in Washington state, have countable
20 income equal to or below one hundred ninety-three percent of the
21 federal poverty level, and are not otherwise eligible for full scope
22 coverage under Title XIX or Title XXI of the federal social security
23 act. Health care coverage under this section must be provided during
24 the twelve-month period beginning on the last day of the pregnancy.
25 To ensure continuity of care and maximize the efficiency of the
26 program, the amount, scope, and duration of health care services
27 provided to individuals under this section must be the same as that
28 provided to pregnant and postpartum persons under medical assistance,
29 as defined in RCW 74.09.520.

30 NEW SECTION. **Sec. 4.** To allow the state to receive federal
31 matching funds for the coverage of postpartum persons identified in
32 section 3 of this act, the authority shall: (1) Seek any available
33 federal financial participation under the medical assistance program,
34 as codified at Title XIX of the federal social security act, the
35 state children's health insurance program, as codified at Title XXI
36 of the federal social security act, and any other federal funding
37 sources that are now available or may become available in the future;
38 and (2) no later than January 1, 2021, submit a waiver request to the

1 federal centers for medicare and medicaid services. The authority
2 shall report to the legislature on the status of the waiver request
3 by January 1, 2021, and inform the legislature of any statutory
4 changes necessary to allow the state to receive federal match for the
5 coverage of postpartum persons identified in section 3 of this act.

6 NEW SECTION. **Sec. 5.** (1) Section 3 of this act takes effect
7 when the state becomes eligible to receive federal financial
8 participation, in addition to that which is available as of the
9 effective date of this section, for health care coverage for persons
10 with countable income at or below one hundred ninety-three percent of
11 the federal poverty level through twelve months postpartum.

12 (2) Section 2 of this act expires on the date section 3 of this
13 act takes effect.

14 NEW SECTION. **Sec. 6.** The health care authority must provide
15 written notice of the effective date of section 3 of this act to the
16 affected parties, the chief clerk of the house of representatives,
17 the secretary of the senate, the office of the code reviser, and
18 others deemed appropriate by the authority.

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