

2E2SSB 5580 - H COMM AMD

By Committee on Appropriations

ADOPTED AND ENGROSSED 02/28/2024

1 Strike everything after the enacting clause and insert the
2 following:

3 "NEW SECTION. **Sec. 1.** A new section is added to chapter 74.09
4 RCW to read as follows:

5 (1) By no later than January 1, 2026, the authority shall create
6 a postdelivery and transitional care program that allows for extended
7 postdelivery hospital care for people with a substance use disorder
8 at the time of delivery. The authority shall:

9 (a) Allow for up to five additional days of hospitalization stay
10 for the birth parent;

11 (b) Provide the birth parent access to integrated care and
12 medical services including, but not limited to, access to clinical
13 health, medication management, behavioral health, addiction medicine,
14 specialty consultations, and psychiatric providers;

15 (c) Provide the birth parent access to social work support which
16 includes coordination with the department of children, youth, and
17 families to develop a plan for safe care;

18 (d) Allow dedicated time for health professionals to assist in
19 facilitating early bonding between the birth parent and infant by
20 helping the birth parent recognize and respond to their infant's
21 cues; and

22 (e) Establish provider requirements and pay only those qualified
23 providers for the services provided through the program.

24 (2) In order to provide technical assistance to participating
25 hospitals regarding the postdelivery and transitional care program,
26 the authority shall contract with the Washington state chapter of a
27 national organization that provides a physician-led professional
28 community for those who prevent, treat, and promote remission and
29 recovery from the disease of addiction and whose comprehensive set of
30 guidelines for determining placement, continued stay, and transfer or
31 discharge of enrollees with substance use disorders and co-occurring

1 disorders have been incorporated into medicaid managed care
2 contracts.

3 (3) In administering the program, the authority shall seek any
4 available federal financial participation under the medical
5 assistance program, as codified at Title XIX of the federal social
6 security act, the state children's health insurance program, as
7 codified at Title XXI of the federal social security act, the federal
8 family first prevention services act, and any other federal funding
9 sources that are now available or may become available.

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

12 (1) Subject to the amounts appropriated for this specific
13 purpose, the authority shall update the maternity support services
14 program to address perinatal outcomes and increase equity and
15 healthier birth outcomes. By January 1, 2026, the authority shall:

16 (a) Update current screening tools to be culturally relevant,
17 include current risk factors, ensure the tools address health equity,
18 and include questions identifying various social determinants of
19 health that impact a healthy birth outcome and improve health equity;

20 (b) Ensure care coordination, including sharing screening tools
21 with the patient's health care providers as necessary;

22 (c) Develop a mechanism to collect the results of the maternity
23 support services screenings and evaluate the outcomes of the program.
24 At minimum, the program evaluation shall:

25 (i) Identify gaps, strengths, and weaknesses of the program; and

26 (ii) Make recommendations for how the program may improve to
27 better align with the authority's maternal and infant health
28 initiatives; and

29 (d) Increase the allowable benefit and reimbursement rates with
30 the goal of increasing utilization of services to all eligible
31 maternity support services clients who choose to receive the
32 services.

33 (2) The authority shall adopt rules to implement this section.

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

36 By November 1, 2024, the income standards for a pregnant person
37 eligible for Washington apple health pregnancy coverage shall have

1 countable income equal to or below 210 percent of the federal poverty
2 level.

3 **Sec. 4.** RCW 74.09.830 and 2021 c 90 s 2 are each amended to read
4 as follows:

5 (1) The authority shall extend health care coverage from 60 days
6 postpartum to one year postpartum for pregnant or postpartum persons
7 who, on or after the expiration date of the federal public health
8 emergency declaration related to COVID-19, are receiving postpartum
9 coverage provided under this chapter.

10 (2) By June 1, 2022, the authority must:

11 (a) Provide health care coverage to postpartum persons who reside
12 in Washington state, have countable income equal to or below 193
13 percent of the federal poverty level, and are not otherwise eligible
14 under Title XIX or Title XXI of the federal social security act; and

15 (b) Ensure all persons approved for pregnancy or postpartum
16 coverage at any time are continuously eligible for postpartum
17 coverage for 12 months after the pregnancy ends regardless of whether
18 they experience a change in income during the period of eligibility.

19 (3) By November 1, 2024, the income standards for a postpartum
20 person eligible for Washington apple health pregnancy or postpartum
21 coverage shall have countable income equal to or below 210 percent of
22 the federal poverty level.

23 (4) Health care coverage under this section must be provided
24 during the 12-month period beginning on the last day of the
25 pregnancy.

26 ((+4)) (5) The authority shall not provide health care coverage
27 under this section to individuals who are eligible to receive health
28 care coverage under Title XIX or Title XXI of the federal social
29 security act. Health care coverage for these individuals shall be
30 provided by a program that is funded by Title XIX or Title XXI of the
31 federal social security act. Further, the authority shall make every
32 effort to expedite and complete eligibility determinations for
33 individuals who are presumptively eligible to receive health care
34 coverage under Title XIX or Title XXI of the federal social security
35 act to ensure the state is receiving the maximum federal match. This
36 includes, but is not limited to, working with the managed care
37 organizations to provide continuous outreach in various modalities
38 until the individual's eligibility determination is completed.
39 Beginning January 1, 2022, the authority must submit quarterly

1 reports to the caseload forecast work group on the number of
2 individuals who are presumptively eligible to receive health care
3 coverage under Title XIX or Title XXI of the federal social security
4 act but are awaiting for the authority to complete eligibility
5 determination, the number of individuals who were presumptively
6 eligible but are now receiving health care coverage with the maximum
7 federal match under Title XIX or Title XXI of the federal social
8 security act, and outreach activities including the work with managed
9 care organizations.

10 ~~((5))~~ (6) To ensure continuity of care and maximize the
11 efficiency of the program, the amount and scope of health care
12 services provided to individuals under this section must be the same
13 as that provided to pregnant and postpartum persons under medical
14 assistance, as defined in RCW 74.09.520.

15 ~~((6))~~ (7) In administering this program, the authority must
16 seek any available federal financial participation under the medical
17 assistance program, as codified at Title XIX of the federal social
18 security act, the state children's health insurance program, as
19 codified at Title XXI of the federal social security act, and any
20 other federal funding sources that are now available or may become
21 available. This includes, but is not limited to, ensuring the state
22 is receiving the maximum federal match for individuals who are
23 presumptively eligible to receive health care coverage under Title
24 XIX or Title XXI of the federal social security act by expediting
25 completion of the individual's eligibility determination.

26 ~~((7))~~ (8) Working with stakeholder and community organizations
27 and the Washington health benefit exchange, the authority must
28 establish a comprehensive community education and outreach campaign
29 to facilitate applications for and enrollment in the program or into
30 a more appropriate program where the state receives maximum federal
31 match. Subject to the availability of amounts appropriated for this
32 specific purpose, the education and outreach campaign must provide
33 culturally and linguistically accessible information to facilitate
34 participation in the program, including but not limited to enrollment
35 procedures, program services, and benefit utilization.

36 ~~((8))~~ (9) Beginning January 1, 2022, the managed care
37 organizations contracted with the authority to provide postpartum
38 coverage must annually report to the legislature on their work to
39 improve maternal health for enrollees, including but not limited to
40 postpartum services offered to enrollees, the percentage of enrollees

1 utilizing each postpartum service offered, outreach activities to
2 engage enrollees in available postpartum services, and efforts to
3 collect eligibility information for the authority to ensure the
4 enrollee is in the most appropriate program for the state to receive
5 the maximum federal match.

6 NEW SECTION. **Sec. 5.** If specific funding for the purposes of
7 this act, referencing this act by bill or chapter number, is not
8 provided by June 30, 2024, in the omnibus appropriations act, this
9 act is null and void."

10 Correct the title.

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