

# SENATE BILL REPORT

## SB 5338

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As of January 18, 2023

**Title:** An act relating to a review of the state's essential health benefits.

**Brief Description:** Reviewing the state's essential health benefits.

**Sponsors:** Senators Cleveland, Muzzall, Conway and Randall.

**Brief History:**

**Committee Activity:** Health & Long Term Care: 1/20/23.

**Brief Summary of Bill**

- Directs the Office of the Insurance Commissioner to review the state's essential health benefits and determine whether to request federal approval to update those benefits.

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### SENATE COMMITTEE ON HEALTH & LONG TERM CARE

**Staff:** Greg Attanasio (786-7410)

**Background:** Under the Affordable Care Act, each state must designate an Essential Health Benefits benchmark plan to serve as a benchmark for all individual and small group health plans offered in the state. Washington's most recent designation of the essential health benefits benchmark plan was in 2016.

In 2019, the Department of Health and Human Services issued a notice of benefits and payment parameters that gives states an opportunity to update their essential health benefit benchmark plans for 2020 and beyond. The deadline for submission of a request and supporting documents for a future plan year is May two years before the plan year the essential health benefits update would take effect. The submission must include an actuarial analysis and description of the new benchmark plan, include a description of benefits and limits.

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*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.*

**Summary of Bill:** The Office of the Insurance Commissioner (OIC), in consultation with relevant interested persons and entities, must review Washington's benchmark health plan establishing the state's essential health benefits to determine whether to request approval to modify the state's essential health benefits benchmark plan.

As part of this review, OIC must determine the potential impacts on qualified health plan design, actuarial values, and premium rates if coverage for each of the following was included as an essential health benefit:

- hearing instruments and associated services;
- fertility services;
- contralateral prophylactic mastectomies; and
- magnetic resonance imaging for breast cancer screening.

Any update of the state's essential health benefits benchmark plan must also include coverage for human donor milk.

By December 1, 2023, OIC must report the results of the review to the relevant committees of the Legislature, including any findings related to modifying the state's essential health benefits.

**Appropriation:** None.

**Fiscal Note:** Requested on January 14, 2023.

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

**Effective Date:** Ninety days after adjournment of session in which bill is passed.