
ENGROSSED SUBSTITUTE SENATE BILL 5128

State of Washington

69th Legislature

2025 Regular Session

By Senate Human Services (originally sponsored by Senators C. Wilson, Hasegawa, Nobles, Saldaña, Valdez, and Wellman)

READ FIRST TIME 01/30/25.

1 AN ACT Relating to medical services for individuals in juvenile
2 detention facilities; amending RCW 74.09.555 and 71.24.715;
3 reenacting and amending RCW 74.09.670; creating new sections; and
4 providing expiration dates.

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

6 NEW SECTION. **Sec. 1.** The legislature recognizes that in 2021,
7 Engrossed Second Substitute Senate Bill 5304 was signed into law to
8 better ensure continuity of coverage for medicaid enrollment of
9 incarcerated youth. The legislature finds that further clarification
10 is required to ensure local and state juvenile facilities are made
11 aware of opportunities for continuity of coverage. The legislature
12 therefore resolves to remove ambiguity in state statute and to direct
13 the health care authority to document its efforts working with local
14 providers to ensure a warm handoff upon release from detention
15 facilities.

16 **Sec. 2.** RCW 74.09.670 and 2021 c 243 s 2 and 2021 c 166 s 2 are
17 each reenacted and amended to read as follows:

18 (1) Except as provided in subsection (2) of this section, when
19 the authority receives information that a person enrolled in medical
20 assistance is confined in a setting in which federal financial

1 participation is disallowed by the state's agreements with the
2 federal government, the authority shall suspend, rather than
3 terminate, medical assistance benefits for these persons, including
4 those who are (~~incarcerated~~): Incarcerated in a correctional
5 (~~institution~~) facility as defined in RCW (~~(9.94.049,)~~) 72.09.015
6 and 70.48.020, confined in an institution or facility operated by the
7 department of children, youth, and families, or committed to a state
8 hospital or other treatment facility. A person who is not currently
9 enrolled in medical assistance must be allowed to apply for medical
10 assistance in suspense status during confinement, and the ability to
11 apply may not depend upon knowledge of the release or discharge date
12 of the person.

13 (2) (a) During the first 29 days of a person's incarceration or
14 confinement in a correctional (~~institution~~) facility, as defined in
15 RCW (~~(9.94.049)~~) 72.09.015 and 70.48.020, or in an institution or
16 facility operated by the department of children, youth, and families:

17 (i) A person's incarceration or confinement status may not affect
18 the person's enrollment in medical assistance if the person was
19 enrolled in medical assistance at the time of incarceration or
20 confinement; and

21 (ii) A person not enrolled in medical assistance at the time of
22 incarceration or confinement must have the ability to apply for
23 medical assistance during incarceration or confinement, which may not
24 depend on knowledge of the release date of the person. If the person
25 is enrolled in medical assistance during the first 29 days of the
26 person's incarceration or confinement, the person's incarceration or
27 confinement status may not affect the person's enrollment in medical
28 assistance.

29 (b) After the first 29 days of the person's incarceration or
30 confinement, the person's medical assistance status is subject to
31 suspension or application in suspense status under subsection (1) of
32 this section.

33 **Sec. 3.** RCW 74.09.555 and 2021 c 243 s 3 are each amended to
34 read as follows:

35 (1) The authority shall adopt rules and policies providing that
36 when persons who were enrolled in medical assistance immediately
37 prior to confinement, or who become enrolled in medical assistance in
38 suspense status during the period of confinement, are released from
39 confinement, their medical assistance coverage shall be fully

1 reinstated no later than at the moment of their release, subject to
2 any expedited review of their continued eligibility for medical
3 assistance coverage that is required under federal or state law. The
4 authority may reinstate medical assistance prior to the day of
5 release provided that no federal funds are expended for any purpose
6 that is not authorized by the state's agreements with the federal
7 government.

8 (2) The authority, in collaboration with the Washington
9 association of sheriffs and police chiefs, the department of
10 corrections, the department of children, youth, and families, managed
11 care organizations, and behavioral health administrative services
12 organizations, shall establish procedures for coordination between
13 the authority and department field offices, institutions for mental
14 disease, ~~((and))~~ ~~((institutions))~~ facilities, as defined
15 in RCW ~~((9.94.049,))~~ 72.09.015 and 70.48.020, and institutions or
16 facilities operated by the department of children, youth, and
17 families, that result in prompt reinstatement of eligibility and
18 speedy eligibility determinations for medical assistance services
19 upon release from confinement. Procedures developed under this
20 subsection must address:

21 (a) Mechanisms for receiving medical assistance services
22 applications on behalf of confined persons in anticipation of their
23 release from confinement;

24 (b) Expeditious review of applications filed by or on behalf of
25 confined persons and, to the extent practicable, completion of the
26 review before the person is released;

27 (c) Mechanisms for providing medical assistance services identity
28 cards to persons eligible for medical assistance services before
29 their release from confinement;

30 (d) Coordination with the federal social security administration,
31 through interagency agreements or otherwise, to expedite processing
32 of applications for federal supplemental security income or social
33 security disability benefits, including federal acceptance of
34 applications on behalf of confined persons; and

35 (e) Assuring that notification of the person's release date,
36 current location, and other appropriate information is provided to
37 the person's managed care organization before the person's scheduled
38 release from confinement, or as soon as practicable thereafter.

39 (3) Where medical or psychiatric examinations during a person's
40 confinement indicate that the person is disabled, the correctional

1 (~~institution or~~) facility, institution for mental diseases, or
2 institution or facility operated by the department of children,
3 youth, and families, shall provide the authority with that
4 information for purposes of making medical assistance eligibility and
5 enrollment determinations prior to the person's release from
6 confinement. The authority shall, to the maximum extent permitted by
7 federal law, use the examination in making its determination whether
8 the person is disabled and eligible for medical assistance.

9 (4) For purposes of this section, "confined" or "confinement"
10 means incarcerated in a correctional (~~institution~~) facility, as
11 defined in RCW (~~9.94.049,~~) 72.09.015 and 70.48.020, held in an
12 institution or facility operated by the department of children,
13 youth, and families, or admitted to an institute for mental disease,
14 as defined in 42 C.F.R. part 435, Sec. 1009 on July 24, 2005.

15 (5) The economic services administration within the department
16 shall adopt standardized statewide screening and application
17 practices and forms designed to facilitate the application of a
18 confined person for medicaid.

19 **Sec. 4.** RCW 71.24.715 and 2021 c 243 s 4 are each amended to
20 read as follows:

21 (1) The health care authority shall apply for a waiver allowing
22 the state to provide medicaid services to persons who are confined in
23 a correctional (~~institution~~) facility as defined in RCW (~~9.94.049~~
24 ~~or confined in~~) 72.09.015 and 70.48.020, institution or facility
25 operated by the department of children, youth, and families, or a
26 state hospital or other treatment facility up to 30 days prior to the
27 person's release or discharge to the community. The purpose is to
28 create continuity of care and provide reentry services.

29 (2) The health care authority shall consult with the work group
30 established under RCW 71.24.710 about how to optimize the waiver
31 application and its chance of success, including by limiting its
32 scope if deemed appropriate.

33 (3) The health care authority shall inform the governor and
34 relevant committees of the legislature in writing when the waiver
35 application is submitted and update them as to progress of the waiver
36 at appropriate points.

37 (4) No provision of this section may be interpreted to require
38 the health care authority to provide medicaid services to persons who
39 are confined in a correctional (~~institution~~) facility, state

1 hospital, or other treatment facility up to 30 days prior to the
2 person's release or discharge unless the health care authority
3 obtains final approval for its waiver application from the centers
4 for medicare and medicaid services.

5 NEW SECTION. **Sec. 5.** (1) The health care authority shall
6 collaborate with managed care organizations, the reentry services
7 work group established under RCW 71.24.710, the department of
8 children, youth, and families, and detention facilities, as defined
9 in RCW 13.40.020, to implement section 5121 of the consolidated
10 appropriations act of 2023 (P.L. 117-328) that requires the provision
11 of:

12 (a) Screening and diagnostic services to eligible juveniles in
13 the 30 days prior to release, or not later than one week or as soon
14 as practicable after release; and

15 (b) Targeted case management services for a minimum of 30 days
16 prior to release and for at least 30 days or as medically necessary
17 following release to connect juveniles with services and providers in
18 the geographic area where the eligible juvenile will be residing upon
19 release, when possible.

20 (2) This section expires July 1, 2026.

21 NEW SECTION. **Sec. 6.** (1) The health care authority shall
22 leverage existing resources, development plans, and funding as part
23 of its other medical assistance programs, including the section 1115
24 demonstration waiver and reentry services initiative approved by the
25 federal department of health and human services on June 30, 2023.

26 (2) This section expires July 1, 2026.

27 NEW SECTION. **Sec. 7.** (1) By December 1, 2025, and in compliance
28 with RCW 43.01.036, the health care authority shall submit a report
29 to the governor and the legislature on:

30 (a) The status of the authority's operational plan to implement
31 section 5121 of the consolidated appropriations act of 2023 (P.L.
32 117-328); and

33 (b) A summary of the authority's collaboration efforts with
34 managed care organizations, the reentry services work group
35 established under RCW 71.24.710, the department of children, youth,
36 and families, and detention facilities as defined in RCW 13.40.020,

1 and the identification of any barriers or challenges to providing
2 services to eligible juveniles across the state.

3 (2) This section expires July 1, 2026.

4 NEW SECTION. **Sec. 8.** If any part of this act is found to be in
5 conflict with federal requirements that are a prescribed condition to
6 the allocation of federal funds to the state, the conflicting part of
7 this act is inoperative solely to the extent of the conflict and with
8 respect to the agencies directly affected, and this finding does not
9 affect the operation of the remainder of this act in its application
10 to the agencies concerned.

--- END ---