## ENGROSSED SECOND SUBSTITUTE SENATE BILL 6128

## AS AMENDED BY THE HOUSE

Passed Legislature - 2020 Regular Session

## 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.

- AN ACT Relating to improving maternal health outcomes by extending coverage during the postpartum period; adding a new section to chapter 74.09 RCW; creating new sections; and providing a
- 4 contingent effective date.
- 5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- NEW SECTION. Sec. 1. (1) In Washington and across the country, maternal mortality rates continue to be unacceptably high. 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 givty-five days negther tum
- 20 three and three hundred sixty-five days postpartum.

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

- (5) Postpartum medicaid coverage currently ends sixty days after pregnancy, creating an unsafe gap in coverage. Continuity of care is critical during this vulnerable time, and uninterrupted health insurance provides birthing parents with access to stable and consistent care. Extending health care coverage through the first year postpartum is one of the best tools for increasing access to care and improving maternal and infant health.
- (6) The legislature therefore intends to extend health care coverage from sixty days to twelve months postpartum. Nothing in this act is intended to limit eligibility or reduce benefits that are available to pregnant or postpartum persons as of the effective date of this section.
- NEW SECTION. Sec. 2. A new section is added to chapter 74.09
  RCW to read as follows:
  - The authority shall provide health care coverage to all postpartum persons who reside in Washington state, have countable income equal to or below one hundred ninety-three percent of the federal poverty level, and are not otherwise eligible for full scope coverage under Title XIX or Title XXI of the federal social security act. Health care coverage under this section must be extended by an additional ten months, for those enrolled postpartum persons who are eligible under pregnancy eligibility rules at the end of the sixty day postpartum period, to provide a total of twelve months postpartum coverage. To ensure continuity of care and maximize the efficiency of the program, the amount, scope, and duration of health care services provided to individuals under this section must be the same as that provided to pregnant and postpartum persons under medical assistance, as defined in RCW 74.09.520.
- NEW SECTION. Sec. 3. To allow the state to receive federal matching funds for the coverage of postpartum persons identified in section 2 of this act, the authority shall: (1) Seek any available federal financial participation under the medical assistance program,

as codified at Title XIX of the federal social security act, the 1 state children's health insurance program, as codified at Title XXI 2 of the federal social security act, and any other federal funding 3 sources that are now available or may become available in the future; 4 and (2) no later than January 1, 2021, submit a waiver request to the 5 6 federal centers for medicare and medicaid services. The authority 7 shall report to the legislature on the status of the waiver request by January 1, 2021, and inform the legislature of any statutory 8 9 changes necessary to allow the state to receive federal match for the coverage of postpartum persons identified in section 2 of this act. 10

NEW SECTION. Sec. 4. Section 2 of this act takes effect when the state becomes eligible to receive federal financial participation for health care coverage for persons with countable income at or below one hundred ninety-three percent of the federal poverty level through twelve months postpartum.

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NEW SECTION. Sec. 5. The health care authority must provide written notice of the effective date of section 2 of this act to the affected parties, the chief clerk of the house of representatives, the secretary of the senate, the office of the code reviser, and others deemed appropriate by the health care authority.

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