
HOUSE BILL 1947

State of Washington 60th Legislature 2007 Regular Session

By Representatives Cody, Hinkle, Schual-Berke, Morrell and Ormsby

Read first time 02/01/2007. Referred to Committee on Health Care & Wellness.

1 AN ACT Relating to promoting chronic care management in medical
2 assistance programs for full benefit dual eligible beneficiaries;
3 adding a new section to chapter 74.09 RCW; creating a new section; and
4 declaring an emergency.

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

6 NEW SECTION. **Sec. 1.** (1) The legislature finds that the blue
7 ribbon commission on health care costs and access has recommended that
8 Washington state become a leader in prevention and management of
9 chronic illness. Their consensus recommendation provides that state
10 health purchasing agencies, including the medical assistance program,
11 will integrate proven chronic care management into all state programs.
12 The state further finds that full benefit dual eligible beneficiaries,
13 who are eligible for both the federal medicare program and medical
14 assistance benefits, are among the most chronically ill medical
15 assistance clients.

16 (2) The legislature intends to take an opportunity to realize the
17 blue ribbon commission's recommendation by directing the department of
18 social and health services to continue to support the enrollment of

1 some full benefit dual eligible beneficiaries in the managed health
2 care plan of their choice, in coordination with the federal medicare
3 program.

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

6 (1) The department shall pay the premiums associated with
7 enrollment in a medicare advantage plan for those full benefit dual
8 eligible beneficiaries who were enrolled on November 1, 2006, in a
9 medicare advantage plan sponsored by an entity accredited by the
10 national committee for quality assurance and for whom the department
11 had been paying the medicare advantage plan premium as of that date.

12 (2) The department shall undertake, directly or by contract, a
13 study to determine the cost-effectiveness of paying premiums for
14 enrollment of full benefit dual eligible beneficiaries in medicare
15 advantage plans in lieu of paying full benefit dual eligible
16 beneficiaries' medicare cost-sharing. The study shall compare the cost
17 and health outcomes experience for three groups of full benefit dual
18 eligible beneficiaries:

19 (a) A group of full benefit dual eligible beneficiaries who have
20 been continuously enrolled in a medicare advantage plan sponsored by an
21 entity accredited by the national committee for quality assurance for
22 at least the past three years;

23 (b) A group of full benefit dual eligible beneficiaries who have
24 been enrolled in a medicare special needs plan for a minimum of six
25 months; and

26 (c) A group of full benefit dual eligible beneficiaries who receive
27 their medicare services through the medicare fee for service system.

28 The department shall attempt to have consistency across the three
29 groups with respect to the health status of the full benefit dual
30 eligible beneficiaries being compared. The study shall compare the
31 health status and utilization of health and long-term care services for
32 the three groups, and the impact of access to a medical home and
33 specialty care, over a period of two years to determine any differences
34 in health status, health outcomes, and state expenditures that result.

35 The department shall submit the results of the study to the
36 governor and the legislature on or before December 1, 2009.

1 (3) For purposes of this section, "full benefit dual eligible
2 beneficiary" means an individual who, for any month: (a) Has coverage
3 for the month under a medicare prescription drug plan or medicare
4 advantage plan with part D coverage; and (b) is determined eligible by
5 the state for full medicaid benefits for the month under any
6 eligibility category in the state's medicaid plan or a section 1115
7 demonstration waiver that provides pharmacy benefits.

8 NEW SECTION. **Sec. 3.** This act is necessary for the immediate
9 preservation of the public peace, health, or safety, or support of the
10 state government and its existing public institutions, and takes effect
11 immediately.

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