

# FINAL BILL REPORT

## SSB 5419

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C 34 L 95

Synopsis as Enacted

**Brief Description:** Modifying federal financial participation related to health insurer's and children's health care.

**Sponsors:** Senate Committee on Health & Long-Term Care (originally sponsored by Senators Fairley and Quigley; by request of Department of Social and Health Services).

**Senate Committee on Health & Long-Term Care**

**House Committee on Health Care**

**Background:** Federal law (OBRA 93) requires certain insurance coverage standards for Medicaid-eligible persons, and children covered by medical child support orders. Under this federal law, the state's Medicaid program, administered by the Department of Social and Health Services (DSHS), faces potential federal fiscal sanctions if it does not comply with federal requirements. Therefore, DSHS and the Office of the Insurance Commissioner have requested changes to state law.

**Summary:** Insurers, as specified, cannot deny health plan enrollment of a child under the health care coverage of the child's parent on the grounds that the child is receiving Medicaid benefits, or is illegitimate, or was not claimed as a dependent on the parent's federal income tax return, or does not reside with the parent or in the insurer's service area.

Disenrollment of the child is not permitted except in specified circumstances, and insurers are prohibited from taking Medicaid status into account in approving enrollment or in payment of benefits. Coordination of benefits with Medicaid is required, as is the coverage of adoptive children, and the continuation of childhood immunization benefits.

**Votes on Final Passage:**

Senate	46 0
House	97 0

**Effective:** July 23, 1995