

Northwest Health Law Advocates works to ensure access to health care for all. We target systemic problems in health care and achieve solutions through policy analysis and advocacy.

During the 2018 Washington legislative session that ended March 8, we sought to:

- Protect and strengthen existing coverage;
- Make health care coverage more affordable;
- Ensure access to women’s health services;
- Improve accessibility of hospital benefits for low-income consumers; and
- Protect consumers from unfair pricing.

We testified on several bills and worked with stakeholders and legislators on improving others. A leadership shift in the Senate created new opportunities this year. Below we highlight some of the most significant bills affecting health care access. For the full scoop, see our [legislative](#) and [budget](#) summaries.

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### ***Protecting and Strengthening Existing Coverage***

The Legislature passed several bills this session to preserve features of the Affordable Care Act (ACA) in state law, in the face of federal attempts to erode essential health benefits, destabilize the individual insurance market, and do away with the “individual mandate” requiring people to have health insurance.

Legislation ([HB 1523](#)) maintains the preventive benefits required to be covered by health plans at the end of 2016. The bill protects women’s access to many health care services that are at risk, including birth control, and ensures they remain free of cost-sharing. The law protects Washington consumers from new federal rules that undermine these benefits. Another bill ([HB 2516](#)) removes references to the ACA in state law to ensure that state-defined Health Benefit Exchange operations continue regardless of what changes are made to the federal law. [HB 2408](#) aims to increase the options for coverage in regions that typically have few plans and higher premiums by linking insurers’ school employee contracts to individual market offerings starting in 2020, with an interim provision for 2019 - offering subsidized [WSHIP](#) coverage to individuals in “bare” counties.

We are disappointed the Legislature was unable to create a state individual mandate or develop other approaches to protect individual market premiums from escalating.

Additional actions to protect and strengthen Medicaid coverage include:

- Restoring Medicaid coverage of hearing aids for adults – this benefit was cut in 2011 and is one of the last to be reinstated;
- Extending the Access to Baby and Child Dentistry program to children with disabilities to age 12 ([SB 6549](#));
- Funding a multi-agency package to address opioid related deaths, with increased payment rates for Medicaid Medication Assisted Treatment;
- Increasing payments for pediatric primary care providers and the “health home” program providing integrated care for Medicare/Medicaid dual eligible persons;
- Transitioning behavioral health oversight and purchasing from the Department of Social and Health Services to the Health Care Authority, intended to streamline care for consumers ([HB 1388](#)).

There are many studies due to the Legislature before the end of 2018 related to health care access. We'll be watching for reports on single payer and universal health care coverage systems, primary care access for Medicaid clients, children's mental health, behavior health integration cost savings, stability of the individual insurance market and the impact of Medicaid managed dental care being rolled out.

### ***Making Health Care Coverage More Affordable***

NoHLA supported bills to address health care coverage for immigrants. We were pleased that the Legislature passed [a bill](#) to help low-income immigrants from the [COFA islands](#) to afford Qualified Health Plan coverage. But another bill we testified on did not pass – it would have provided Medicaid-like coverage to low-income young adults up to age 26 – such as Dreamers. This bill would have partially closed a gap created when the state Basic Health Program ended in 2013.

The Insurance Commissioner proposed a state-based reinsurance program to help reduce premiums and stabilize the individual health insurance market; the bill failed due to disagreement on a funding source.

### ***Ensuring Access to Women's Health Services***

Washington made great strides this year in protecting women's access to reproductive health care. Under the Reproductive Parity Act ([SB 6219](#)), insurance companies must provide birth control coverage without co-pays and those that provide coverage for maternity care must also cover abortion care. All Food and Drug Administration (FDA) approved over-the-counter contraceptives must also be covered

without a prescription. However, the Reproductive Health Access for All Act did not pass. The bill would have expanded reproductive health access to all people in Washington by including specific provisions to address the needs of immigrant and transgender women.

### ***Improving Accessibility of Hospital Benefits for Low-income Consumers***

Spurred by a [Columbia Legal Services report on charity care](#), legislation ([SB 6273](#)) passed to improve notification to consumers about the availability of charity care. The bill requires charity care notices to be provided in hospital bills and posted in multiple languages at hospitals. NoHLA worked with legislators and stakeholders to ensure that the final bill language did not inadvertently disadvantage low-income consumers.

### ***Protecting Consumers from Unfair Pricing***

“Surprise billing” - you get an unexpected, high medical bill from an out-of-network provider you didn't know about. You couldn't avoid it – you had a medical emergency and were powerless to control who treated you at the hospital. The problem stems from the fact that providers do not have payment agreements with insurers, and consumers are caught in the middle. This is a major problem in our state. For the third consecutive year, a bill to address this moved forward. This time, it got close to the finish line but did not pass. Providers and insurers agreed with the concept but expressed concern about how payment amounts would be set. Consumers remain caught in the middle for at least another year.

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## **Advancing Toward 2019 and Beyond**

In the face of ongoing federal threats to our health care, NoHLA will continue to work with consumers, advocates and policymakers to protect and improve health care. The bills that did not pass this year will remain our priorities in 2019 and years to come. We will continue to fight for consumers to have the care they need and deserve.