BILL REQUEST - CODE REVISER'S OFFICE

BILL REQ. #: Z-0417.1/26

MW:jlb ATTY/TYPIST:

Providing flexibility in the partnership access line assessment to cover administrative costs. BRIEF DESCRIPTION:

- 1 AN ACT Relating to providing flexibility in the partnership
- 2 access line assessment to cover administrative costs; and amending
- 3 RCW 71.24.064.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 5 **Sec. 1.** RCW 71.24.064 and 2024 c 358 s 3 are each amended to 6 read as follows:
- 7 (1) Beginning July 1, 2021, the partnership access lines 8 described in RCW 71.24.061(3)(a), the psychiatric consultation line 9 described in RCW 71.24.062, and the first approach skills training 10 program described in RCW 71.24.061(3)(a)(iv) shall be funded as 11 follows:
- 12 (a) The authority, in consultation with the University of
 13 Washington department of psychiatry and behavioral sciences and
 14 Seattle children's hospital shall determine the annual costs of
 15 operating each program, as well as the authority's costs for
 16 administering the programs.
- 17 (b) For each program, the authority shall calculate the 18 proportion of clients that are covered by programs administered 19 pursuant to chapter 74.09 RCW. The state must cover the cost for 20 programs administered pursuant to chapter 74.09 RCW through state and 21 federal funds, as appropriated.

- 1 (c)(i) The authority shall collect a proportional share of 2 program costs from each of the following entities that are not for 3 covered lives under contract with the authority as medicaid managed 4 care organizations:
 - (A) Health carriers, as defined in RCW 48.43.005;
- 6 (B) Self-funded multiple employer welfare arrangements, as defined in RCW 48.125.010;
 - (C) Employers or other entities that provide health care in this state, including self-funding entities or employee welfare benefit plans.
 - (ii) For entities listed in (c)(i) of this subsection, a proportional share of the entity's annual program costs for each program must be calculated by determining the annual cost of operating the program not covered under (b) of this subsection and multiplying it by a fraction that in which the numerator is the entity's total number of resident insured persons among the population served by the program and the denominator is the total number of residents in the state who are served by the program and not covered by programs administered pursuant to chapter 74.09 RCW. The total number of resident insured persons among the population served by the program shall be determined according to the covered lives per calendar year determined by covered person months.
 - (iii) The entities listed in (c)(i) of this subsection shall provide information needed to calculate the proportional share of program costs under this section to the authority.
 - ((d) The authority's administrative costs for these programs may not be included in the assessments.))
 - (iv) Reasonable costs for the administration of the assessment by a contracted third-party administrator may be included in the total assessment on the entities listed in (c)(i) of this subsection as part of the proportional share calculation. The authority's other administrative costs for these programs may not be included in the assessments.
- 34 (2) The authority may contract with a third-party administrator 35 to calculate and administer the assessments of the entities 36 identified in subsection (1)(c)(i) of this section.
- 37 (3) The authority shall develop separate performance measures for 38 the partnership access lines described in RCW 71.24.061(3)(a), and 39 the psychiatric consultation line described in RCW 71.24.062.

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(4) The University of Washington department of psychiatry and behavioral sciences, in coordination with any hospital that it collaborates with to administer the programs, shall provide quarterly reports to the authority on the demographic data collected by each program, as described in RCW 71.24.063 (1) and (2), any performance measures specified by the authority, and systemic barriers to services, as determined and defined by the authority, the University of Washington, and Seattle children's hospital.

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