

**Sec. 113 of SB5204 covers integration** of federal health coverage funds into the Whole Washington Health Trust.

*FEDERAL LAW HAS **NOT** PRE-EMPTED THE POSSIBILITY OF STATE-BASED COVERAGE IN THIS AREA; THE ISSUE IS BEING ABLE TO DIRECTLY ADMINISTER THE FUNDS.*

**Full integration** of applicable funds is the ultimate goal, but the WWHT can operate for various eligible recipients of federally-funded coverage in the interim.

1. Integration steps
  - a. HCA to determine which state and federal laws affect full integration of federally qualified health coverage funds into the WWHT and report its recommendations to the governor.
  - b. The governor, in consultation with the WWHT board and the HCA, to take steps to receive applicable waivers, exemptions, **or approval for demonstration projects from federal agencies in order to fully integrate coverage and funding available through federally qualified health coverage programs directing applicable funds into the WWHT.**
    - i. Federally-qualified health coverage trusts/applicable agencies
      - 1) HHS—Medicare
        - a. Obtain approval for the WWHT to operate as a MAP or other demonstration project (most likely/quickest) OR
        - b. Other statutory or regulatory waiver of provisions that constitute barriers to full integration
      - 2) HHS—Medicaid
        - a. Seek applicable waivers to incorporate Medicaid/CHIP funds into the WWHT; likely to involve a demonstration project
    - ii. HHS--Community and migrant health clinics and other health services funded through the PHS Act
      - a. Approval of applicable demonstration project OR
      - b. Other statutory or regulatory waiver of provisions of the PHS Act
    - iii. OPM—Negotiate for the inclusion of federal employee health benefits in the WWHT
    - iv. DOD/DOT--Negotiate for the inclusion of the civilian health and medical program of the uniformed services in the WWHT
2. Interim/transitional approaches
  - a. Residents who are eligible for federal health benefits may enroll in the WWHT and have their federal premium payments refunded to them
    - i. Full coverage under the WWHT may include benefits that are not covered by the federal program (e.g., Medicare), so any additional premiums paid by those residents to supplemental plans would no longer be necessary.
  - b. WWHT could become a Medicaid “carrier” in the interim through a contractual arrangement between DSHS and HCA.