
SENATE BILL 5165

State of Washington

64th Legislature

2015 Regular Session

By Senators Angel and Frockt

1 AN ACT Relating to coverage of home health benefits for persons
2 seeking palliative care treatments; amending RCW 48.21.220,
3 48.21A.090, and 48.44.320; and creating a new section.

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

5 **Sec. 1.** RCW 48.21.220 and 1988 c 245 s 31 are each amended to
6 read as follows:

7 (1) Every insurer entering into or renewing group or blanket
8 disability insurance policies governed by this chapter shall offer
9 optional coverage for home health care and hospice care for persons
10 who are homebound and would otherwise require hospitalization. Such
11 optional coverage need only be offered in conjunction with a policy
12 that provides payment for hospitalization as a part of health care
13 coverage. Persons seeking such services for palliative care in
14 conjunction with treatment or management of chronic or life-
15 threatening illness need not be homebound in order to be eligible for
16 coverage under this section.

17 (2) Home health care and hospice care coverage offered under
18 subsection (1) of this section shall conform to the following
19 standards, limitations, and restrictions in addition to those set
20 forth in chapter 70.126 RCW:

1 (a) The coverage may include reasonable deductibles, coinsurance
2 provisions, and internal maximums;

3 (b) The coverage should be structured to create incentives for
4 the use of home health care and hospice care as an alternative to
5 hospitalization;

6 (c) The coverage may contain provisions for utilization review
7 and quality assurance;

8 (d) The coverage may require that home health agencies and
9 hospices have written treatment plans approved by a physician
10 licensed under chapter 18.57 or 18.71 RCW, and may require such
11 treatment plans to be reviewed at designated intervals;

12 (e) The coverage shall provide benefits for, and restrict
13 benefits to, services rendered by home health and hospice agencies
14 licensed by the department of social and health services;

15 (f) Hospice care coverage shall provide benefits for terminally
16 ill patients for an initial period of care of not less than six
17 months and may provide benefits for an additional six months of care
18 in cases where the patient is facing imminent death or is entering
19 remission if certified in writing by the attending physician;

20 (g) Home health care coverage shall provide benefits for a
21 minimum of one hundred thirty health care visits per calendar year.
22 However, a visit of any duration by an employee of a home health
23 agency for the purpose of providing services under the plan of
24 treatment constitutes one visit;

25 (h) The coverage may be structured so that services or supplies
26 included in the primary contract are not duplicated in the optional
27 home health and hospice coverage.

28 (3) The insurance commissioner shall adopt any rules necessary to
29 implement this section.

30 (4) The requirements of this section shall not apply to contracts
31 or policies governed by chapter 48.66 RCW.

32 (5) An insurer, as a condition of reimbursement, may require
33 compliance with home health and hospice certification regulations
34 established by the United States department of health and human
35 services.

36 **Sec. 2.** RCW 48.21A.090 and 1989 1st ex.s. c 9 s 220 are each
37 amended to read as follows:

38 (1) Every insurer entering into or renewing extended health
39 insurance governed by this chapter shall offer optional coverage for

1 home health care and hospice care for persons who are homebound and
2 would otherwise require hospitalization. Such optional coverage need
3 only be offered in conjunction with a policy that provides payment
4 for hospitalization as a part of health care coverage. Persons
5 seeking such services for palliative care in conjunction with
6 treatment or management of chronic or life-threatening illness need
7 not be homebound in order to be eligible for coverage under this
8 section.

9 (2) Home health care and hospice care coverage offered under
10 subsection (1) of this section shall conform to the following
11 standards, limitations, and restrictions in addition to those set
12 forth in chapters 70.126 and 70.127 RCW:

13 (a) The coverage may include reasonable deductibles, coinsurance
14 provisions, and internal maximums;

15 (b) The coverage should be structured to create incentives for
16 the use of home health care and hospice care as an alternative to
17 hospitalization;

18 (c) The coverage may contain provisions for utilization review
19 and quality assurance;

20 (d) The coverage may require that home health agencies and
21 hospices have written treatment plans approved by a physician
22 licensed under chapter 18.57 or 18.71 RCW, and may require such
23 treatment plans to be reviewed at designated intervals;

24 (e) The coverage shall provide benefits for, and restrict
25 benefits to, services rendered by home health and hospice agencies
26 licensed under chapter 70.127 RCW;

27 (f) Hospice care coverage shall provide benefits for terminally
28 ill patients for an initial period of care of not less than six
29 months and may provide benefits for an additional six months of care
30 in cases where the patient is facing imminent death or is entering
31 remission if certified in writing by the attending physician;

32 (g) Home health care coverage shall provide benefits for a
33 minimum of one hundred thirty health care visits per calendar year.
34 However, a visit of any duration by an employee of a home health
35 agency for the purpose of providing services under the plan of
36 treatment constitutes one visit;

37 (h) The coverage may be structured so that services or supplies
38 included in the primary contract are not duplicated in the optional
39 home health and hospice coverage.

1 (3) The insurance commissioner shall adopt any rules necessary to
2 implement this section.

3 (4) The requirements of this section shall not apply to contracts
4 or policies governed by chapter 48.66 RCW.

5 (5) An insurer, as a condition of reimbursement, may require
6 compliance with home health and hospice certification regulations
7 established by the United States department of health and human
8 services.

9 **Sec. 3.** RCW 48.44.320 and 1989 1st ex.s. c 9 s 222 are each
10 amended to read as follows:

11 (1) Every health care service contractor entering into or
12 renewing a group health care service contract governed by this
13 chapter shall offer optional coverage for home health care and
14 hospice care for persons who are homebound and would otherwise
15 require hospitalization. Such optional coverage need only be offered
16 in conjunction with a policy that provides payment for
17 hospitalization as a part of health care coverage. Persons seeking
18 such services for palliative care in conjunction with treatment or
19 management of chronic or life-threatening illness need not be
20 homebound in order to be eligible for coverage under this section.

21 (2) Home health care and hospice care coverage offered under
22 subsection (1) of this section shall conform to the following
23 standards, limitations, and restrictions in addition to those set
24 forth in chapters 70.126 and 70.127 RCW:

25 (a) The coverage may include reasonable deductibles, coinsurance
26 provisions, and internal maximums;

27 (b) The coverage should be structured to create incentives for
28 the use of home health care and hospice care as an alternative to
29 hospitalization;

30 (c) The coverage may contain provisions for utilization review
31 and quality assurance;

32 (d) The coverage may require that home health agencies and
33 hospices have written treatment plans approved by a physician
34 licensed under chapter 18.57 or 18.71 RCW, and may require such
35 treatment plans to be reviewed at designated intervals;

36 (e) The coverage shall provide benefits for, and restrict
37 benefits to, services rendered by home health and hospice agencies
38 licensed under chapter 70.127 RCW;

1 (f) Hospice care coverage shall provide benefits for terminally
2 ill patients for an initial period of care of not less than six
3 months and may provide benefits for an additional six months of care
4 in cases where the patient is facing imminent death or is entering
5 remission if certified in writing by the attending physician;

6 (g) Home health care coverage shall provide benefits for a
7 minimum of one hundred thirty health care visits per calendar year.
8 However, a visit of any duration by an employee of a home health
9 agency for the purpose of providing services under the plan of
10 treatment constitutes one visit;

11 (h) The coverage may be structured so that services or supplies
12 included in the primary contract are not duplicated in the optional
13 home health and hospice coverage.

14 (3) The insurance commissioner shall adopt any rules necessary to
15 implement this section.

16 (4) The requirements of this section shall not apply to contracts
17 or policies governed by chapter 48.66 RCW.

18 (5) An insurer, as a condition of reimbursement, may require
19 compliance with home health and hospice certification regulations
20 established by the United States department of health and human
21 services.

22 NEW SECTION. **Sec. 4.** This act applies to plans issued or
23 renewed after December 31, 2016.

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