

Executive Summary: Health Impact Review of SB 5814

Concerning health coverage for young adults (2020 Legislative Session)

Evidence indicates that SB 5814 has the potential to increase access to health insurance for young adults 19 to 26 years of age who are income-eligible, regardless of immigration status, which may increase access to and use of healthcare services, improve health outcomes, and decrease health inequities by immigration status.

BILL INFORMATION

Sponsors: Nguyen, Keiser, Frockt, Hasegawa, Dhingra, Saldaña, Takko, Darneille, Hunt, Kuderer, Wilson, C., Randall

Summary of Bill:

- Directs Health Care Authority (HCA) to extend Apple Health coverage to young adults 19 to 26 years of age who are income-eligible, regardless of immigration status.
- Specifies that the amount, scope, and duration of healthcare services must be the same as that provided to individuals under categorically needy medical assistance.
- Requires HCA to provide a seamless transition in coverage, and to manage application and renewal processes to maximize enrollment of eligible individuals.
- Directs HCA to seek federal funding to defray state costs associated with this coverage.

HEALTH IMPACT REVIEW

Summary of Findings:

This Health Impact Review found the following evidence for provisions in SB 5814:

- **Very strong evidence** that HCA extending Apple Health coverage to young adults 19 to 26 years of age who are income eligible, regardless of immigration status, would increase access to health insurance for these individuals.
- **Very strong evidence** that increased access to health insurance would improve health outcomes.
- **Very strong evidence** that increased access to health insurance would increase access to and use of healthcare services.
- **Very strong evidence** that increased access to and use of healthcare services would improve health outcomes.
- **Very strong evidence** that improved health outcomes would decrease health inequities by immigration status.
- **Strong evidence** that improving health outcomes for youth who are deaf or hard of hearing would decrease health inequities for these individuals. It is unclear how H-3483.2/20 would impact inequities by insurance status and geography.

FULL REVIEW

For review methods, logic model, strength-of-evidence analyses, and citations of empirical evidence refer to the full Health Impact Review at

<https://sboh.wa.gov/Portals/7/Doc/HealthImpactReviews/HIR-2020-06-SB5814.pdf>

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