



Snohomish County Council

Legislation Details (With Text)

File #: 2023-0562 **Version:** 1

Type: Ordinance **Status:** Approved

File created: 5/11/2023 **In control:** Public Hearings

On agenda: 6/28/2023 **Final action:** 6/28/2023

Title: Ordinance 23-052, approving agreement with Health Care Authority for the Medicaid Administrative Claiming Program

Sponsors:

Indexes:

Code sections: Charter 1.30 - Intergovernmental Relations

Attachments: 1. Ordinance 23-052, 2. Agreement - SIGNED, 3. Staff Report, 4. Ordinance Introduction Slip, 5. Hearing Notice & Affidavit of Publication, 6. Enactment Notice & Affidavit of Publication

| Date | Ver. | Action By | Action | Result |
|-----------|------|---|----------------------------------|--------|
| 6/28/2023 | 1 | Public Hearings | Approved | Pass |
| 6/14/2023 | 1 | General Legislative Session | Set time/date for Public Hearing | |
| 6/13/2023 | 1 | Health and Community Services Committee | Moved to the GLS Regular Agenda | |
| 5/23/2023 | 1 | Administrative Session | Assigned | |

Executive/Council Action Form (ECAF)

ITEM TITLE:

Ordinance 23-052, approving agreement with Health Care Authority for the Medicaid Administrative Claiming Program

DEPARTMENT: Health Department

ORIGINATOR: Rhonda Smids-Osborne

EXECUTIVE RECOMMENDATION: Lacey Harper 5/15/23

PURPOSE: The purpose of this Agreement is to support Medicaid related outreach and linkage activities performed by Local Health Jurisdictions (LHJ) to Washington State residents who live within its jurisdiction. These activities assist residents who have no or inadequate medical coverage, and includes explaining the benefits of the Medicaid program, assisting them in the Medicaid application and renewal processes, and linking them to Medicaid covered services. This Agreement provides a process for partially reimbursing the Health Department for allowable and reasonable expenses associated with the time its staff spend performing Medicaid Administrative Claiming (MAC) activities.

BACKGROUND: Prior to its integration into Snohomish County, the Snohomish Health District entered into an interagency agreement with the Washington State Health Care Authority for the Medicaid Administrative Claiming Program and wish to continue this partnership. The Centers for Medicare and Medicaid Services is the federal agency with national oversight of the Medicaid program, including Medicaid Administrative

Claiming.

FISCAL IMPLICATIONS:

| EXPEND: FUND, AGY, ORG, ACTY, OBJ, AU | CURRENT YR | 2ND YR | 1ST 6 YRS |
|---------------------------------------|------------|--------|-----------|
| | | | |
| | | | |
| TOTAL | | | |

| REVENUE: FUND, AGY, ORG, REV, SOURCE | CURRENT YR | 2ND YR | 1ST 6 YRS |
|--------------------------------------|----------------|--------|-----------|
| 125 3 15 625 3778 | Revenue varies | | |
| | | | |
| TOTAL | | | |

DEPARTMENT FISCAL IMPACT NOTES: Click or tap here to enter text.

CONTRACT INFORMATION:

| | | | | | |
|-----------|-------------------------------------|-----------|-------|--------|----------------|
| ORIGINAL | <input checked="" type="checkbox"/> | CONTRACT# | 6191 | AMOUNT | Revenue varies |
| AMENDMENT | <input type="checkbox"/> | CONTRACT# | _____ | AMOUNT | _____ |

Contract Period

| | | | | |
|-----------|-------|------------|-----|------------|
| ORIGINAL | START | 01/01/2023 | END | 12/31/2025 |
| AMENDMENT | START | _____ | END | _____ |

OTHER DEPARTMENTAL REVIEW/COMMENTS: Reviewed/approved by: Risk Management (Sheila Barker 5/11/23), Finance (Nathan Kennedy 5/12/23) and Deputy Prosecuting Attorney has not approved as to form.