204 WCAAP Legislative Agenda

Improve children’s and teens’ health and help with families’ social and financial needs that impact their well-being.

Our healthcare system is complex. It is challenging for all families to navigate, but especially families who face linguistic or financial struggles. Challenges to caregiver well being alongside structural inequities such as poverty, housing instability, and food insecurity, threaten foundational early childhood health. Simultaneously, Washington state’s children and youth continue to face a mental health crisis; 64% of Washington youth with behavioral health needs are not receiving any form of care. By taking the burden of navigation off of families, care coordinators and Community Health Workers (CHWs) can improve patient outcomes, ensuring that children get the medical services they require as well as connect families to much-needed resources. CHWs can also serve as family educators, helping create safe, stable, and nurturing relationships between children and their caregiver, which is necessary for establishing lifelong health and development.

Solutions

Fund community health workers and care coordination for kids in primary care.

- The Washington State Legislature invested in the Pediatric CHW workforce through a 2-year grant program led by the Health Care Authority (HCA) beginning in January 2023. The 30-funded clinics (including 7 tribal clinics) have already seen significant impacts in their ability to address the health-related social needs of children ages 0-18 and their families, improve access to behavioral health services, and build trusting, collaborative relationships with families.
- We urge our state legislature and HCA to:
  1. Continue to fund the existing pediatric community health worker workforce (40 CHWs) for 2 more years. This will cost approximately $2M GFS and allow time to assess the full impact of the pilot as well as preserve the employment of current CHWs and support the primary care physician workforce that is being supported by these workers.
  2. Allow for care coordination activities on Apple Health for Kids, which will result in ongoing federal match to sustain and spread this invaluable resource for children and teens via:
     - Increase reimbursement for existing behavioral and social screening so that when children and families screen in need, they receive needed health care or support. (Increase funding for cpt codes: 96127, 96160, 96161.)
     - Increase funding for behavioral health integration in primary care and associated care coordination for behavioral health. (Enable cpt code 99484 at Medicare rate.)

Improve child health and school success with daily access to healthy food

In 2022-2023 one-third of Washington households with children had low or very low food security and nearly three-fourths relied on food assistance (UW WSU).

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Solutions

Provide funding to the Office of the Superintendent of Public Instruction to provide free school meals to all school-aged children (K-12) in Washington State.

- Children who eat school meals consume a healthier diet overall than those who do not. (CDC)
- Eating breakfast at school is associated with better attendance and better test scores. (CDC)
- Providing free school meals for all children is a proven way to eliminate barriers and stigma for children to get the food they need for healthy growth and development. (Hopkins)
- The American Academy of Pediatrics supports healthy school meals for all students regardless of income eligibility, to ensure no kids go hungry and to eliminate both barriers and stigma. (Source)

Update Statute Governing WA Universal Purchase for Immunizations

Washington’s current law that governs our state’s universal purchase program for immunizations includes a narrow and outdated definition of ‘vaccine’. This definition presents a technical barrier, preventing our universal purchase program from acquiring newly developed, life-saving immunizations that fall outside that outdated definition. Our state’s long-standing universal purchase system has improved health equity, significantly decreased costs to the state and the commercially insured, and created meaningful efficiencies for providers and clinics to administer vaccines. As science advances, the definition of ‘vaccine’ must remain current so that the universal purchase program can continue its vital function.

Solutions

Update the current statute’s definition of ‘vaccine’ to make it more inclusive of current and future immunization products. Sample updated language for the statute might read:

- "Vaccine" means ((a preparation of killed or attenuated living microorganisms, or fraction thereof, that upon administration stimulates immunity that protects against disease and is)) an immunization approved by the Federal Food and Drug Administration as safe and effective and recommended by the advisory committee on immunization practices of the centers for disease control and prevention for administration to children under the age of nineteen years.

Prevent Gun Violence

Firearms continue to be the number one cause of child deaths for the third year in a row (Source.) This is a public health emergency for children and teens, and it is past time that we treat it as one.

Solutions

Pass legislation to require a permit to purchase a firearm. A permit-to-purchase system would ensure background check, safety training, and a waiting period to have a firearm. States with permit-to-purchase laws have lower rates of firearm-related death, lower rates of guns diverted to criminals shortly after retail sale, and lower rates of guns exported to criminals in other states.

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