SENATE BILL NO. 87

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-SIXTH LEGISLATURE - FIRST SESSION

BY SENATORS WIELECHOWSKI, Paskvan, Ellis, Davis, Kookesh, Elton, French, Menard

Introduced: 1/28/09

Referred: Health and Social Services, Finance

A BILL

FOR AN ACT ENTITLED

- 1 "An Act expanding medical assistance coverage for eligible children and pregnant
- 2 women; relating to cost sharing for certain recipients of medical assistance; and
- 3 providing for an effective date."
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:
- * Section 1. The uncodified law of the State of Alaska is amended by adding a new section to read:
- 7 SHORT TITLE. This Act may be known as the No Child Left Uninsured Act.
- 8 * **Sec. 2.** AS 47.07.020(b) is amended to read:
- 9 (b) In addition to the persons specified in (a) of this section, the following optional groups of persons for whom the state may claim federal financial participation are eligible for medical assistance:
- (1) persons eligible for but not receiving assistance under any plan of the state approved under 42 U.S.C. 1381 - 1383c (Title XVI, Social Security Act, Supplemental Security Income) or a federal program designated as the successor to the

1	aid to families with dependent children program;
2	(2) persons in a general hospital, skilled nursing facility, or
3	intermediate care facility, who, if they left the facility, would be eligible for assistance
4	under one of the federal programs specified in (1) of this subsection;
5	(3) persons under 21 years of age who are under supervision of the
6	department, for whom maintenance is being paid in whole or in part from public
7	funds, and who are in foster homes or private child-care institutions;
8	(4) aged, blind, or disabled persons, who, because they do not meet
9	income and resources requirements, do not receive supplemental security income
10	under 42 U.S.C. 1381 - 1383c (Title XVI, Social Security Act), and who do not
11	receive a mandatory state supplement, but who are eligible, or would be eligible if
12	they were not in a skilled nursing facility or intermediate care facility to receive an
13	optional state supplementary payment;
14	(5) persons under 21 years of age who are in an institution designated
15	as an intermediate care facility for the mentally retarded and who are financially
16	eligible as determined by the standards of the federal program designated as the
17	successor to the aid to families with dependent children program;
18	(6) persons in a medical or intermediate care facility whose income
19	while in the facility does not exceed \$1,656 a month but who would not be eligible for
20	an optional state supplementary payment if they left the hospital or other facility;
21	(7) persons under 21 years of age who are receiving active treatment in
22	a psychiatric hospital and who are financially eligible as determined by the standards
23	of the federal program designated as the successor to the aid to families with
24	dependent children program;
25	(8) persons under 21 years of age and not covered under (a) of this
26	section, who would be eligible for benefits under the federal program designated as
27	the successor to the aid to families with dependent children program, except that they
28	have the care and support of both their natural and adoptive parents;
29	(9) pregnant women not covered under (a) of this section and who

successor to the aid to families with dependent children program;

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meet the income and resource requirements of the federal program designated as the

1	(10) persons under 21 years of age not covered under (a) of this section
2	who the department has determined cannot be placed for adoption without medical
3	assistance because of a special need for medical or rehabilitative care and who the
4	department has determined are hard-to-place children eligible for subsidy under
5	AS 25.23.190 - 25.23.210;
6	(11) persons who can be considered under 42 U.S.C. 1396a(e)(3) (Title
7	XIX, Social Security Act, Medical Assistance) to be individuals with respect to whom
8	a supplemental security income is being paid under 42 U.S.C. 1381 - 1383c (Title
9	XVI, Social Security Act) because they meet all of the following criteria:
10	(A) they are 18 years of age or younger and qualify as disabled
11	individuals under 42 U.S.C. 1382c(a) (Title XVI, Social Security Act);
12	(B) the department has determined that
13	(i) they require a level of care provided in a hospital,
14	nursing facility, or intermediate care facility for the mentally retarded;
15	(ii) it is appropriate to provide their care outside of an
16	institution; and
17	(iii) the estimated amount that would be spent for
18	medical assistance for their individual care outside an institution is not
19	greater than the estimated amount that would otherwise be expended
20	individually for medical assistance within an appropriate institution;
21	(C) if they were in a medical institution, they would be eligible
22	for medical assistance under other provisions of this chapter; and
23	(D) home and community-based services under a waiver
24	approved by the federal government are either not available to them under this
25	chapter or would be inappropriate for them;
26	(12) disabled persons, as described in 42 U.S.C.
27	1396a(a)(10)(A)(ii)(XIII), who are in families whose income, as determined under
28	applicable federal regulations or guidelines, is less than 250 percent of the official
29	poverty line applicable to a family of that size according to the United States
30	Department of Health and Human Services, and who, but for earnings in excess of the
31	limit established under 42 U.S.C. 1396d(q)(2)(B), would be considered to be

1	individuals with respect to whom a supplemental security income is being paid under
2	42 U.S.C. 1381 - 1383c; a person eligible for assistance under this paragraph who is
3	not eligible under another provision of this section shall pay a premium or other cost-
4	sharing charges according to a sliding fee scale that is based on income as established
5	by the department in regulations;
6	(13) persons under 19 years of age who are not covered under (a) of
7	this section and whose household income does not exceed 200 [175] percent of the
8	federal poverty line as defined by the United States Department of Health and Human
9	Services and revised under 42 U.S.C. 9902(2);
10	(14) pregnant women who are not covered under (a) of this section and
11	whose household income does not exceed 200 [175] percent of the federal poverty line
12	as defined by the United States Department of Health and Human Services and revised
13	under 42 U.S.C. 9902(2);
14	(15) persons who have been diagnosed with breast or cervical cancer
15	and who are eligible for coverage under 42 U.S.C. 1396a(a)(10)(A)(ii)(XVIII).
16	* Sec. 3. AS 47.07 is amended by adding a new section to read:
17	Sec. 47.07.022. Extended medical assistance coverage for children; costs.
18	(a) In addition to the persons specified in AS 47.07.020, a person who resides in the
19	state and who meets the criteria under (b) of this section is eligible for extended
20	medical assistance coverage equivalent to the mandatory and optional services
21	described under AS 47.07.030 if the person submits an annual application and
22	contribution as specified in (c) of this section.
23	(b) The department shall administer a program of extended medical assistance
24	coverage for a person
25	(1) who is under 19 years of age;
26	(2) whose household income is between 200 and 300 percent of the
27	federal poverty guideline as defined by the United States Department of Health and
28	Human Services and revised under 42 U.S.C. 9902(2); and
29	(3) whose parent or legal guardian certifies that the person is not
30	covered under a health insurance policy.
31	(c) The program administered under this section must include an annual

1	application and sliding scale contribution, payable under terms specified in regulations
2	adopted by the department. The regulations must
3	(1) include the option of an assignment of an applicant's permanent
4	fund dividend and the permanent fund dividend of a parent, legal guardian, or other
5	authorized representative of an applicant; and
6	(2) set the annual contribution amount between \$240 and \$1,200,
7	beginning with \$240 for a person whose household income is between 201 percent and
8	225 percent of the federal poverty guideline and increasing progressively based on the
9	person's household income.
10	(d) In addition to the annual contribution established under (c) of this section,
11	the department shall impose a copayment of 20 percent for medical services and
12	prescription drug costs covered under the program for a person whose household
13	income is between 250 and 300 percent of the federal poverty guideline.
14	* Sec. 4. AS 47.07.042(d) is amended to read:
15	(d) In addition to the requirements established under (a) and (b) of this section,
16	the department shall [MAY] require premiums or cost-sharing contributions from
17	recipients who are eligible for benefits under AS 47.07.022. The
18	[AS 47.07.020(b)(13) AND WHOSE HOUSEHOLD INCOME IS BETWEEN 150
19	AND 175 PERCENT OF THE FEDERAL POVERTY LINE. IF THE
20	DEPARTMENT REQUIRES PREMIUMS OR COST-SHARING
21	CONTRIBUTIONS UNDER THIS SUBSECTION, THE] department
22	(1) shall adopt in regulation a sliding scale for those premiums or
23	contributions based on household income;
24	(2) may not exceed the maximums allowed under federal law; and
25	(3) shall implement a system by which the department or its designee
26	collects those premiums or contributions.
27	* Sec. 5. The uncodified law of the State of Alaska is amended by adding a new section to
28	read:
29	TRANSITION: REGULATIONS. The Department of Health and Social Services may
30	proceed to adopt regulations necessary to implement the changes made by this Act. The
31	regulations take effect under AS 44.62 (Administrative Procedure Act), but not before the

- 1 effective date of secs. 1 4 of this Act.
- * Sec. 6. Section 5 of this Act takes effect immediately under AS 01.10.070(c).
- 3 * Sec. 7. Except as provided in sec. 6 of this Act, this Act takes effect July 1, 2010.