

Public Act No. 21-176

AN ACT CONCERNING MEDICAL ASSISTANCE FOR CHILDREN AND ADULTS WITHOUT HEALTH CARE COVERAGE.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. Section 17b-261 of the general statutes is amended by adding subsection (l) as follows (*Effective October 1, 2021*):

(l) On and after January 1, 2023, the Commissioner of Social Services shall, within available appropriations, provide state-funded medical assistance to any child eight years of age and younger, regardless of immigration status, whose household income does not exceed two hundred one per cent of the federal poverty level without an asset limit and who does not otherwise qualify for Medicaid, the Children's Health Insurance Program, or an offer of affordable, employer-sponsored insurance as defined in the Affordable Care Act, as an employee or a dependent of an employee.

Sec. 2. (NEW) (*Effective October 1, 2021*) On or after April 1, 2023, the Commissioner of Social Services shall, within available appropriations, provide state-funded medical assistance for postpartum care for twelve months after birth to a woman who does not qualify for Medicaid due to immigration status and whose household income does not exceed two hundred sixty-three per cent of the federal poverty level.

Sec. 3. Subsection (a) of section 17b-292 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1*, 2021):

(a) A child who resides in a household with household income [which] <u>that</u> exceeds one hundred ninety-six per cent of the federal poverty level [and] <u>but</u> does not exceed three hundred eighteen per cent of the federal poverty level may be eligible for benefits under HUSKY B. <u>Not later than January 1, 2023, the Commissioner of Social Services shall, within available appropriations, provide state-funded medical assistance to any child eight years of age and younger, regardless of immigration status, with a household income that exceeds two hundred one per cent of the federal poverty level but does not exceed three hundred twenty-three per cent of the federal poverty level, and who does not otherwise qualify for Medicaid, the Children's Health Insurance Program, or an offer of affordable, employer-sponsored insurance as defined in the Affordable Care Act, as an employee or a dependent of an employee.</u>

Sec. 4. (NEW) (*Effective October 1, 2021*) As used in this section, "unborn child option" means a state option available under the Children's Health Insurance Program pursuant to Title XXI of the Social Security Act, as amended from time to time, that allows states to consider an unborn child a low-income child eligible for coverage of prenatal care if other conditions of eligibility under the Children's Health Insurance Program are met. Not later than April 1, 2022, the Commissioner of Social Services shall provide medical assistance for prenatal care through the unborn child option under the medical assistance program established pursuant to section 17b-292 of the general statutes. The commissioner shall amend the state plan for the Children's Health Insurance Program to provide such medical assistance.

Sec. 5. (NEW) (*Effective from passage*) (a) The Executive Director of the **Public Act No. 21-176 2** of 4

Office of Health Strategy, in consultation with the Office of Policy and Management, the Department of Social Services, the Connecticut Insurance Department and the Connecticut Health Insurance Exchange established pursuant to section 38a-1081 of the general statutes, shall study the feasibility of offering health care coverage for (1) incomeeligible children ages nine to eighteen, inclusive, regardless of immigration status, who are not otherwise eligible for Medicaid, the Children's Health Insurance Program, or an offer of affordable employer sponsored insurance as defined in the Affordable Care Act, as an employee or a dependent of an employee, and (2) adults with household income not exceeding two hundred per cent of the federal poverty level who do not otherwise qualify for medical assistance, an offer of affordable, employer-sponsored insurance as defined in the Affordable Care Act, as an employee or a dependent of an employee, or health care coverage through the Connecticut Health Insurance Exchange due to household income.

(b) The study on the feasibility of providing health care coverage to income-eligible children ages nine to eighteen, inclusive, shall include, but not be limited to: (1) The age groups that would be provided medical assistance in each year, and appropriations necessary to provide such assistance, (2) income eligibility criteria and health care coverage consistent with the medical assistance programs established pursuant to sections 17b-261 and 17b-292 of the general statutes, and (3) recommendations for identifying and enrolling such children in such coverage.

(c) The study on the feasibility of providing health care coverage for adults with household income not exceeding two hundred per cent of the federal poverty level shall include, but not be limited to: (1) Household income caps for adults who would be provided health care coverage in each year, and appropriations necessary to provide such coverage, (2) health care coverage consistent with the medical assistance

programs established pursuant to section 17b-261 of the general statutes and the HUSKY D program as defined in section 17b-290 of the general statutes, and (3) recommendations for identifying and enrolling such adults in such coverage.

(d) Not later than July 1, 2022, the executive director shall report, in accordance with the provisions of section 11-4a of the general statutes, on provisions of the feasibility study to the joint standing committees of the General Assembly having cognizance of matters relating to appropriations and the budgets of state agencies, human services and insurance and real estate.

Sec. 6. (NEW) (*Effective October 1, 2021*) The Commissioner of Social Services may seek a state innovation waiver pursuant to Section 1332 of the Affordable Care Act or enter into contractual agreements, including, but not limited to, contractual agreements with other states, in accordance with established procedures, as may be necessary for the discharge of the commissioner's duties under this act.