SLS 15RS-202 **ORIGINAL** 

2015 Regular Session

SENATE BILL NO. 40

BY SENATOR NEVERS

1

Prefiled pursuant to Article III, Section 2(A)(4)(b)(i) of the Constitution of Louisiana.

HEALTH CARE. Requires the Department of Health and Hospitals provide health care coverage with essential health benefits to every legal Louisiana resident whose household income is at or below 138% of the federal poverty level. (8/1/15)

AN ACT

2	To enact Chapter 8-C of Title 46 of the Louisiana Revised Statutes of 1950, to be comprised
3	of R.S. 46:980.1, relative to health care coverage with essential health benefits; to
4	provide for funding of the program; to provide for possible elements of the program;
5	and to provide for related matters.
6	Be it enacted by the Legislature of Louisiana:
7	Section 1. Chapter 8-C of Title 46 of the Louisiana Revised Statutes of 1950,
8	comprised of R.S. 46:980.1, is hereby enacted to read as follows:
9	CHAPTER 8-C. HEALTH CARE COVERAGE WITH
10	ESSENTIAL HEALTH BENEFITS
11	§ 980.1. Health care coverage with essential health benefits; program options;
12	<u>funding</u>
13	A.(1) Beginning no later than January 1, 2016, every legal Louisiana
14	resident whose household income is at or below one hundred thirty-eight
15	percent of the federal poverty level shall have health care coverage with
16	essential health benefits, and the Department of Health and Hospitals shall
17	administer a state program which makes available to every legal resident of this

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1	state whose household income is at or below one hundred thirty-eight percent
2	of the federal poverty level access to health care coverage with essential health
3	benefits, as provided by federal law and applicable rules and regulations.
4	(2) The department shall make all necessary state Medicaid plan
5	amendments or waiver applications to the federal government in order to access
6	all federal funding available for the provision of health care services, including
7	but not limited to funds available through The Patient Protection and
8	Affordable Care Act, Public Law 111-148, and The Health Care and Education
9	Reconciliation Act, Public Law 111-152, or any successors to these Acts.
10	(3) The department, through federally-approved state Medicaid plan
11	amendments or waiver applications, may consider requirements such as the use
12	of participant required premiums, participant required copayments,
13	participant required health accounts, and cost sharing for nonemergency use
14	of an emergency department.
15	B. The legislature shall annually appropriate the state and federal
16	revenues necessary to fund this program to provide health care coverage for
17	this eligible population, except that, if total funding to operate this state
18	program is comprised of less than ninety percent federal funds, the legislature
19	shall have the authority to decide whether to continue the program. The state
20	general fund shall not be used to pay for the state's responsibility of the
21	program required pursuant to this Section.

The original instrument and the following digest, which constitutes no part of the legislative instrument, were prepared by Christopher D. Adams.

DIGEST 2015 Regular Session

SB 40 Original

Nevers

<u>Proposed law</u> requires beginning no later than January 1, 2016, every legal Louisiana resident whose household income is at or below 138 percent of the federal poverty level shall have health care coverage with essential health benefits, and the Department of Health and Hospitals (DHH) shall administer a state program which makes available to every legal resident of this state whose household income is at or below 138 percent of the federal poverty level access to health care coverage with essential health benefits, as provided by federal law and applicable rules and regulations.

Proposed law requires DHH make all necessary state Medicaid plan amendments or waiver

Coding: Words which are struck through are deletions from existing law; words in **boldface type and underscored** are additions.

applications to the federal government in order to access all federal funding available for the provision of health care services, including but not limited to funds available through federal law.

<u>Proposed law</u> provides DHH, through federally-approved state Medicaid plan amendments or waiver applications, may consider requirements such as the use of participant required premiums, participant required copayments, participant required health accounts, and cost sharing for nonemergency use of an emergency department.

<u>Proposed law</u> provides the legislature annually appropriate the state and federal revenues necessary to fund the program to provide health care coverage for this eligible population, except that, if total funding to operate this state program is comprised of less than 90 percent federal funds, the legislature has the authority to decide whether to continue the program. The state general fund shall not be used to pay for the state's responsibility of the program required pursuant to this Section.

Effective August 1, 2015.

(Adds R.S. 46:980.1)