

FIRST REGULAR SESSION

# SENATE BILL NO. 125

98TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR SCHUPP.

Pre-filed December 3, 2014, and ordered printed.

ADRIANE D. CROUSE, Secretary.

0593L.02I

## AN ACT

To repeal section 208.991, RSMo, and to enact in lieu thereof one new section relating to the MO HealthNet program.

*Be it enacted by the General Assembly of the State of Missouri, as follows:*

Section A. Section 208.991, RSMo, is repealed and one new section  
2 enacted in lieu thereof, to be known as section 208.991, to read as follows:

208.991. 1. For purposes of this section and section 208.990, the following  
2 terms mean:

3 (1) "Child" or "children", a person or persons who are under nineteen  
4 years of age;

5 (2) "CHIP-eligible children", children who meet the eligibility standards  
6 for Missouri's children's health insurance program as provided in sections 208.631  
7 to 208.658, including paying the premiums required under sections 208.631 to  
8 208.658;

9 (3) "Department", the Missouri department of social services, or a division  
10 or unit within the department as designated by the department's director;

11 (4) "MAGI", the individual's modified adjusted gross income as defined in  
12 Section 36B(d)(2) of the Internal Revenue Code of 1986, as amended, and:

13 (a) Any foreign earned income or housing costs;

14 (b) Tax-exempt interest received or accrued by the individual; and

15 (c) Tax-exempt Social Security income;

16 (5) "MAGI equivalent net income standard", an income eligibility  
17 threshold based on modified adjusted gross income that is not less than the  
18 income eligibility levels that were in effect prior to the enactment of Public Law  
19 111-148 and Public Law 111-152;

20 (6) "Medically frail", individuals with:

- 21           **(a) Serious emotional disturbances;**  
22           **(b) Disabling mental disorders;**  
23           **(c) Substance use disorders who are at high risk for significant**  
24 **medical and social costs;**  
25           **(d) Serious and complex medical conditions; or**  
26           **(e) Physical or mental disabilities that significantly impair their**  
27 **ability to perform one or more activities of daily living.**

28           2. (1) Effective January 1, 2014, notwithstanding any other provision of  
29 law to the contrary, the following individuals shall be eligible for MO HealthNet  
30 coverage as provided in this section:

31           (a) Individuals covered by MO HealthNet for families as provided in  
32 section 208.145;

33           (b) Individuals covered by transitional MO HealthNet as provided in 42  
34 U.S.C. Section 1396r-6;

35           (c) Individuals covered by extended MO HealthNet for families on child  
36 support closings as provided in 42 U.S.C. Section 1396r-6;

37           (d) Pregnant women as provided in subdivisions (10), (11), and (12) of  
38 subsection 1 of section 208.151;

39           (e) Children under one year of age as provided in subdivision (12) of  
40 subsection 1 of section 208.151;

41           (f) Children under six years of age as provided in subdivision (13) of  
42 subsection 1 of section 208.151;

43           (g) Children under nineteen years of age as provided in subdivision (14)  
44 of subsection 1 of section 208.151;

45           (h) CHIP-eligible children; and

46           (i) Uninsured women as provided in section 208.659.

47           (2) Effective January 1, 2014, the department shall determine eligibility  
48 for individuals eligible for MO HealthNet under subdivision (1) of this subsection  
49 based on the following income eligibility standards, unless and until they are  
50 changed:

51           (a) For individuals listed in paragraphs (a), (b), and (c) of subdivision (1)  
52 of this subsection, the department shall apply the July 16, 1996, Aid to Families  
53 with Dependent Children (AFDC) income standard as converted to the MAGI  
54 equivalent net income standard;

55           (b) For individuals listed in paragraphs (f) and (g) of subdivision (1) of  
56 this subsection, the department shall apply one hundred thirty-three percent of

57 the federal poverty level converted to the MAGI equivalent net income standard;

58 (c) For individuals listed in paragraph (h) of subdivision (1) of this  
59 subsection, the department shall convert the income eligibility standard set forth  
60 in section 208.633 to the MAGI equivalent net income standard;

61 (d) For individuals listed in paragraphs (d), (e), and (i) of subdivision (1)  
62 of this subsection, the department shall apply one hundred eighty-five percent of  
63 the federal poverty level converted to the MAGI equivalent net income standard.

64 (3) Individuals eligible for MO HealthNet under subdivision (1) of this  
65 subsection shall receive all applicable benefits under section 208.152.

66 **3. Effective January 1, 2016, individuals who meet the following**  
67 **qualifications shall be eligible for the alternative package of MO**  
68 **HealthNet benefits as set forth in subsection 4 of this section, subject**  
69 **to the other requirements of this section:**

70 (1) Are age nineteen or older and under age sixty-five;

71 (2) Are not pregnant;

72 (3) Are not entitled to or enrolled for Medicare benefits under  
73 Part A or B of Title XVIII of the Social Security Act;

74 (4) Are not otherwise eligible for and enrolled for mandatory  
75 coverage under the MO HealthNet program in accordance with 42 CFR  
76 Part 435, Subpart B; and

77 (5) Have household income that is at or below one hundred  
78 thirty-three percent of the federal poverty level for the applicable  
79 family size for the applicable year as converted to the MAGI equivalent  
80 net income standard.

81 **4. Except for those individuals who meet the definition of**  
82 **medically frail, the individuals eligible for MO HealthNet benefits in**  
83 **subsection 3 of this section shall only receive a package of alternative**  
84 **minimum benefits. The MO HealthNet division of the department of**  
85 **social services shall promulgate regulations to be effective January 1,**  
86 **2016, that provide an alternative benefit package that complies with the**  
87 **requirements of federal law and is subject to limitations as established**  
88 **in regulations of the MO HealthNet division.**

89 **5. Individuals eligible for coverage under subsection 3 of this**  
90 **section who meet the definition of medically frail shall receive all**  
91 **coverage they are eligible to receive under section 208.151.**

92 **6. The department of social services shall establish a screening**  
93 **process in conjunction with the department of mental health and**

94 **department of health and senior services for determining whether an**  
95 **individual is medically frail.**

96           7. The department or appropriate divisions of the department shall  
97 promulgate rules to implement the provisions of this section. Any rule or portion  
98 of a rule, as the term is defined in section 536.010, that is created under the  
99 authority delegated in this section shall become effective only if it complies with  
100 and is subject to all of the provisions of chapter 536 and, if applicable, section  
101 536.028. This section and chapter 536 are nonseverable and if any of the powers  
102 vested with the general assembly pursuant to chapter 536 to review, to delay the  
103 effective date or to disapprove and annul a rule are subsequently held  
104 unconstitutional, then the grant of rulemaking authority and any rule proposed  
105 or adopted after August 28, 2013, shall be invalid and void.

106           [4.] 8. The department shall submit such state plan amendments and  
107 waivers to the Centers for Medicare and Medicaid Services of the federal  
108 Department of Health and Human Services as the department determines are  
109 necessary to implement the provisions of this section.

110           **9. (1) The department of social services shall discontinue**  
111 **eligibility for persons who are eligible under subsection 3 of this**  
112 **section if:**

113           **(a) The federal medical assistance percentage established under**  
114 **42 U.S.C. Section 1396d(y) or 1396d(z) is less than ninety percent as**  
115 **specified for 2020 and each year thereafter or an amount determined**  
116 **by the MO HealthNet oversight committee to be necessary to maintain**  
117 **state budget solvency, whichever is lower; and**

118           **(b) The general assembly votes to discontinue eligibility for**  
119 **persons who are eligible under subsection 3 of this section. Prior to**  
120 **any vote under this paragraph, the MO HealthNet oversight committee**  
121 **and the department of social services shall provide the general**  
122 **assembly with information on the current and projected expenses**  
123 **incurred due to expanding eligibility to persons under subsection 3 of**  
124 **this section in relation to health-related savings and revenues and**  
125 **health outcomes of individuals and families receiving benefits under**  
126 **subsection 3 of this section;**

127           **(2) The department of social services shall inform persons**  
128 **eligible under subsection 3 of this section that their benefits may be**  
129 **reduced or eliminated if federal funding decreases or is eliminated.**

130           **10. The MO HealthNet oversight committee shall conduct**  
131 **research and investigate any potential health-related savings and**  
132 **revenues associated with expanding eligibility to persons under**  
133 **subsection 3 of this section. The committee shall investigate the federal**  
134 **matching rate below which the state could not maintain the expanded**  
135 **eligibility to persons under subsection 3 of this section. If the amount**  
136 **is determined to be greater than ninety percent, the committee shall**  
137 **report its findings to the general assembly for its consideration prior**  
138 **to any vote under paragraph (b) of subdivision (1) of subsection 9 of**  
139 **this section. In conducting its research and investigation, the**  
140 **committee shall also determine the feasibility of:**

141           **(1) Implementing capped cost sharing for persons eligible under**  
142 **subsection 3 of this section which may be reduced based on healthy**  
143 **behaviors of participants;**

144           **(2) Expanding Medicaid coverage for certain health care services**  
145 **that are currently financed by the state; and**

146           **(3) Enrolling persons under subsection 3 of this section in**  
147 **private health benefit plans.**

✓

Bill  
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