

FIRST REGULAR SESSION

SENATE BILL NO. 232

100TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR SATER.

Pre-filed January 8, 2019, and ordered printed.

ADRIANE D. CROUSE, Secretary.

1114S.011

AN ACT

To repeal section 208.146, RSMo, and to enact in lieu thereof one new section relating to the ticket to work health assurance program.

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

Section A. Section 208.146, RSMo, is repealed and one new section
2 enacted in lieu thereof, to be known as section 208.146, to read as follows:

208.146. 1. The program established under this section shall be known
2 as the "Ticket to Work Health Assurance Program". Subject to appropriations
3 and in accordance with the federal Ticket to Work and Work Incentives
4 Improvement Act of 1999 (TWWIIA), Public Law 106-170, the medical assistance
5 provided for in section 208.151 may be paid for a person who is employed and
6 who:

7 (1) Except for earnings, meets the definition of disabled under the
8 Supplemental Security Income Program or meets the definition of an employed
9 individual with a medically improved disability under TWWIIA;

10 (2) Has earned income, as defined in subsection 2 of this section;

11 (3) Meets the asset limits in subsection 3 of this section;

12 (4) Has net income, as defined in subsection 3 of this section, that does
13 not exceed the limit for permanent and totally disabled individuals to receive
14 nonspenddown MO HealthNet under subdivision (24) of subsection 1 of section
15 208.151; and

16 (5) Has a gross income of two hundred fifty percent or less of the federal
17 poverty level, excluding any earned income of the worker with a disability
18 between two hundred fifty and three hundred percent of the federal poverty
19 level. For purposes of this subdivision, "gross income" includes all income of the

EXPLANATION—Matter enclosed in bold-faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law.

20 person and the person's spouse that would be considered in determining MO
21 HealthNet eligibility for permanent and totally disabled individuals under
22 subdivision (24) of subsection 1 of section 208.151. Individuals with gross
23 incomes in excess of one hundred percent of the federal poverty level shall pay a
24 premium for participation in accordance with subsection 4 of this section.

25 2. For income to be considered earned income for purposes of this section,
26 the department of social services shall document that Medicare and Social
27 Security taxes are withheld from such income. Self-employed persons shall
28 provide proof of payment of Medicare and Social Security taxes for income to be
29 considered earned.

30 3. (1) For purposes of determining eligibility under this section, the
31 available asset limit and the definition of available assets shall be the same as
32 those used to determine MO HealthNet eligibility for permanent and totally
33 disabled individuals under subdivision (24) of subsection 1 of section 208.151
34 except for:

35 (a) Medical savings accounts limited to deposits of earned income and
36 earnings on such income while a participant in the program created under this
37 section with a value not to exceed five thousand dollars per year; and

38 (b) Independent living accounts limited to deposits of earned income and
39 earnings on such income while a participant in the program created under this
40 section with a value not to exceed five thousand dollars per year. For purposes
41 of this section, an "independent living account" means an account established and
42 maintained to provide savings for transportation, housing, home modification, and
43 personal care services and assistive devices associated with such person's
44 disability.

45 (2) To determine net income, the following shall be disregarded:

46 (a) All earned income of the disabled worker;

47 (b) The first sixty-five dollars and one-half of the remaining earned
48 income of a nondisabled spouse's earned income;

49 (c) A twenty dollar standard deduction;

50 (d) Health insurance premiums;

51 (e) A seventy-five dollar a month standard deduction for the disabled
52 worker's dental and optical insurance when the total dental and optical insurance
53 premiums are less than seventy-five dollars;

54 (f) All Supplemental Security Income payments, and the first fifty dollars
55 of SSDI payments;

56 (g) A standard deduction for impairment-related employment expenses
57 equal to one-half of the disabled worker's earned income.

58 4. Any person whose gross income exceeds one hundred percent of the
59 federal poverty level shall pay a premium for participation in the medical
60 assistance provided in this section. Such premium shall be:

61 (1) For a person whose gross income is more than one hundred percent
62 but less than one hundred fifty percent of the federal poverty level, four percent
63 of income at one hundred percent of the federal poverty level;

64 (2) For a person whose gross income equals or exceeds one hundred fifty
65 percent but is less than two hundred percent of the federal poverty level, four
66 percent of income at one hundred fifty percent of the federal poverty level;

67 (3) For a person whose gross income equals or exceeds two hundred
68 percent but less than two hundred fifty percent of the federal poverty level, five
69 percent of income at two hundred percent of the federal poverty level;

70 (4) For a person whose gross income equals or exceeds two hundred fifty
71 percent up to and including three hundred percent of the federal poverty level,
72 six percent of income at two hundred fifty percent of the federal poverty level.

73 5. Recipients of services through this program shall report any change in
74 income or household size within ten days of the occurrence of such change. An
75 increase in premiums resulting from a reported change in income or household
76 size shall be effective with the next premium invoice that is mailed to a person
77 after due process requirements have been met. A decrease in premiums shall be
78 effective the first day of the month immediately following the month in which the
79 change is reported.

80 6. If an eligible person's employer offers employer-sponsored health
81 insurance and the department of social services determines that it is more cost
82 effective, such person shall participate in the employer-sponsored insurance. The
83 department shall pay such person's portion of the premiums, co-payments, and
84 any other costs associated with participation in the employer-sponsored health
85 insurance.

86 7. The provisions of this section shall expire August 28, [2019] **2025**.

✓