#### SECOND REGULAR SESSION

# **SENATE BILL NO. 629**

### **100TH GENERAL ASSEMBLY**

INTRODUCED BY SENATOR SIFTON.

Pre-filed December 1, 2019, and ordered printed.

ADRIANE D. CROUSE, Secretary.

#### 3899S.01I

## 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Section A. Section 208.146, RSMo, is repealed and one new section  $\mathbf{2}$ enacted in lieu thereof, to be known as section 208.146, to read as follows: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 as the "Ticket to Work Health Assurance Program". Subject to appropriations  $\mathbf{2}$ 3 and in accordance with the federal Ticket to Work and Work Incentives Improvement Act of 1999 (TWWIIA), Public Law 106-170, the medical assistance 4 provided for in section 208.151 may be paid for a person who is employed and 56 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;

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

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(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 not exceed [the limit for permanent and totally disabled individuals to receive 13 nonspenddown MO HealthNet under subdivision (24) of subsection 1 of section 14

208.151; and 15

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

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; and

(c) Retirement accounts, including but not limited to, individual
accounts, 401(k) plans, 403(b) plans, Keogh plans, and pension plans;
provided, that income from such accounts be calculated as income
under subdivision (4) of subsection 1 of this section.

49 (2) To determine [net] income, the following shall be disregarded:

50 (a) [All earned income of the disabled worker;

51 (b)] The first [sixty-five dollars and one-half] fifty thousand dollars of 52 [the remaining] earned income of [a nondisabled spouse's earned income] the 53 person's spouse;

54 [(c)] (b) A twenty dollar standard deduction;

55 [(d)] (c) Health insurance premiums;

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56 [(e)] (d) A seventy-five dollar a month standard deduction for the 57 disabled worker's dental and optical insurance when the total dental and optical 58 insurance premiums are less than seventy-five dollars;

59 [(f)] (e) All Supplemental Security Income payments, and the first fifty
60 dollars of SSDI payments;

61 [(g)] (f) A standard deduction for impairment-related employment 62 expenses equal to one-half of the disabled worker's earned income.

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

66 (1) For a person whose [gross] income is more than one hundred percent
67 but less than one hundred fifty percent of the federal poverty level, four percent
68 of income at one hundred percent of the federal poverty level;

69 (2) For a person whose [gross] income equals or exceeds one hundred fifty
70 percent but is less than two hundred percent of the federal poverty level, four
71 percent of income at one hundred fifty percent of the federal poverty level;

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

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

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

6. If an eligible person's employer offers employer-sponsored health insurance and the department of social services determines that it is more cost effective, such person shall participate in the employer-sponsored insurance. The department shall pay such person's portion of the premiums, co-payments, and any other costs associated with participation in the employer-sponsored health insurance. If the department elects to pay such person's employersponsored insurance costs under this subsection, then the medical SB 629

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92 assistance provided under this section shall be provided to an eligible
93 person as a secondary or supplemental policy for only personal care
94 assistance services, as defined in section 208.900, and related costs and
95 nonemergency medical transportation to any employer-sponsored
96 benefits which may be available to such person.

97 7. The department shall provide to the general assembly an 98 annual report of the number of participants in the program, as well as 99 describe the outreach and education efforts to increase awareness and 100 enrollment in the program.

1018. The department shall submit such state plan amendments and102waivers to the Centers for Medicare and Medicaid Services of the103federal Department of Health and Human Services as the department104determines are necessary to implement the provisions of this section.

105 [7.] 9. The provisions of this section shall expire August 28, 2025.



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