

1 HOUSE BILL NO. 337

2 INTRODUCED BY G. FORRESTER

3

4 A BILL FOR AN ACT ENTITLED: "AN ACT INCREASING THE INCOME ELIGIBILITY FOR MEDICAID AND
5 THE STATE CHILDREN'S HEALTH INSURANCE PLAN TO 200 PERCENT OF THE FEDERAL POVERTY
6 LEVEL; REVISING THE REQUIREMENT FOR A RESOURCE TEST FOR INFANTS AND PREGNANT WOMEN
7 WHOSE FAMILY INCOME IS UNDER 133 PERCENT OF THE FEDERAL POVERTY LEVEL; REQUIRING THE
8 DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES TO SIMPLIFY THE APPLICATION FORM FOR
9 PROGRAMS THAT PROVIDE MEDICAL ASSISTANCE OR BENEFITS OR HEALTH INSURANCE TO
10 FAMILIES; PROVIDING FOR AUTOMATIC ELIGIBILITY IN MEDICAID OR THE STATE CHILDREN'S HEALTH
11 INSURANCE PLAN IF THE CIRCUMSTANCES FOR LOSING ELIGIBILITY QUALIFY A PERSON FOR
12 ENROLLMENT; AMENDING SECTIONS 53-4-1004, 53-4-1006, AND 53-6-131, MCA; AND PROVIDING
13 AN EFFECTIVE DATE."

14

15 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

16

17 **Section 1.** Section 53-4-1004, MCA, is amended to read:18 **"53-4-1004. (Temporary) Eligibility for program -- rulemaking.** (1) To be considered eligible for the
19 program, a child:

20 (a) must be 18 years of age or younger;

21 (b) except as provided in subsection ~~(4)~~ (5), must have a combined family income at or below
22 ~~150%~~ 200% of the federal poverty level;23 (c) may not already be covered by private insurance that offers creditable coverage, as defined
24 in 42 U.S.C. 300gg(c);

25 (d) may not be eligible for medicaid benefits; and

26 (e) must be a United States citizen or qualified alien and a Montana resident.

27 (2) The department of public health and human services shall adopt rules that establish the
28 program's criteria for residency. The criteria must conform as nearly as practicable with the residency
29 requirements for medicaid eligibility.30 (3) An individual who is eligible for a program under this section and loses eligibility must be

1 enrolled in a program under 53-6-131 without making reapplication if the circumstances for losing eligibility
 2 qualify the individual for a program.

3 ~~(3)~~(4) Subject to 53-4-1009(3), rules governing eligibility may also include financial standards and
 4 criteria for income ~~and resources, treatment of resources, and nonfinancial criteria.~~

5 ~~(4)~~(5) If the department determines that there is insufficient funding for the program, it may lower
 6 the percentage of the federal poverty level established in subsection (1)(b) in order to reduce the number
 7 of persons who may be eligible to participate. (Terminates on occurrence of contingency--sec. 15, Ch.
 8 571, L. 1999.)"

9

10 **Section 2.** Section 53-4-1006, MCA, is amended to read:

11 **"53-4-1006. Simplified application form for programs that provide medical assistance or benefits**
 12 **or health insurance to children.** (1) The department of public health and human services shall develop and
 13 implement the use of a simplified application form and process to determine eligibility for children to
 14 receive:

15 (a) medical assistance or medical benefits as provided in 53-6-131;

16 (b) the child-only group health insurance plan provided through the federal Title IV-D program of
 17 the department; or

18 (c) health care under the state children's health insurance program as provided in this part.

19 ~~(2) The department shall develop, in conjunction with health care providers, clients, client~~
 20 ~~representatives, and tribes, and implement the use of a simplified application form and process to~~
 21 ~~determine eligibility for individuals in the same family to receive medical assistance or medical benefits,~~
 22 ~~as provided in 53-6-131, in conjunction with the programs listed in subsection (1) for which only children~~
 23 ~~may qualify.~~

24 ~~(2)~~(3) The application for eligibility for medical assistance may not presume that application is
 25 being made for other forms of public assistance. An appropriate resource test may be incorporated into
 26 the application as required by federal law. The department of ~~public health and human services~~ shall
 27 coordinate education and outreach efforts with any organization performing education and outreach for
 28 any of the programs that are included in the form."

29

30 **Section 3.** Section 53-6-131, MCA, is amended to read:

1 **"53-6-131. Eligibility requirements.** (1) Medical assistance under the Montana medicaid program
2 may be granted to a person who is determined by the department of public health and human services,
3 in its discretion, to be eligible as follows:

4 (a) The person receives or is considered to be receiving supplemental security income benefits
5 under Title XVI of the Social Security Act, 42 U.S.C. 1381, et seq., and does not have income or
6 resources in excess of the applicable medical assistance limits or receive from FAIM financial assistance,
7 as defined in 53-4-702, benefits under Title IV of the federal Social Security Act, 42 U.S.C. 601, et seq.

8 (b) The person would be eligible for assistance under a program described in subsection (1)(a) if
9 that person were to apply for that assistance.

10 (c) The person is in a medical facility that is a medicaid provider and, but for residence in the
11 facility, the person would be receiving assistance under one of the programs in subsection (1)(a).

12 (d) The person is under 19 years of age and meets the conditions of eligibility in the state plan,
13 as defined in 53-4-201, other than with respect to age and school attendance.

14 (e) The person is under 21 years of age and in foster care under the supervision of the state or
15 was in foster care under the supervision of the state and has been adopted as a child with special needs.

16 (f) The person meets the nonfinancial criteria of the categories in subsections (1)(a) through (1)(e)
17 and:

18 (i) the person's income does not exceed 200% of the federal poverty level or the income level
19 specified for federally aided categories of assistance and the person's resources are within the resource
20 standards of the federal supplemental security income program; or

21 (ii) the person, while having income greater than the medically needy income level specified for
22 federally aided categories of assistance:

23 (A) has an adjusted income level, after incurring medical expenses, that does not exceed the
24 medically needy income level specified for federally aided categories of assistance or, alternatively, has
25 paid in cash to the department the amount by which the person's income exceeds the medically needy
26 income level specified for federally aided categories of assistance; and

27 (B) has resources that are within the resource standards of the federal supplemental security
28 income program.

29 (g) The person is a qualified pregnant woman or child as defined in 42 U.S.C. 1396d(n).

30 (2) The department may establish income and resource limitations. Limitations of income and

1 resources must be within the amounts permitted by federal law for the medicaid program.

2 (3) The Montana medicaid program shall pay, as required by federal law, the premiums necessary
3 for medicaid-eligible persons participating in the medicare program and may, within the discretion of the
4 department, pay all or a portion of the medicare premiums, deductibles, and coinsurance for a qualified
5 medicare-eligible person or for a qualified disabled and working individual, as defined in section 6408(d)(2)
6 of the federal Omnibus Budget Reconciliation Act of 1989, Public Law 101-239, who:

7 (a) has income that does not exceed income standards as may be required by the Social Security
8 Act; and

9 (b) has resources that do not exceed standards that the department determines reasonable for
10 purposes of the program.

11 (4) The department may pay a medicaid-eligible person's expenses for premiums, coinsurance,
12 and similar costs for health insurance or other available health coverage, as provided in 42 U.S.C.
13 1396b(a)(1).

14 (5) In accordance with waivers of federal law that are granted by the secretary of the U.S.
15 department of health and human services, the department of public health and human services may grant
16 eligibility for basic medicaid benefits as described in 53-6-101 to an individual receiving FAIM financial
17 assistance, as defined in 53-4-702, as the specified caretaker relative of a dependent child under the FAIM
18 project and to all adult recipients of medical assistance only who are covered under a group related to the
19 program of FAIM financial assistance. A recipient who is pregnant, meets the criteria for disability provided
20 in Title II of the Social Security Act, 42 U.S.C. 416, et seq., or is less than 21 years of age is entitled to
21 full medicaid coverage as provided in 53-6-101.

22 (6) The department, under the Montana medicaid program, may provide, if a waiver is not
23 available from the federal government, medicaid and other assistance mandated by Title XIX of the Social
24 Security Act, 42 U.S.C. 1396, et seq., as may be amended, and not specifically listed in this part to
25 categories of persons that may be designated by the act for receipt of assistance.

26 (7) Notwithstanding any other provision of this chapter, medical assistance must be provided to
27 infants and pregnant women whose family income does not exceed ~~133%~~ 200% of the federal poverty
28 threshold, as provided in 42 U.S.C. 1396a(a)(10)(A)(ii)(IX) and 42 U.S.C. 1396a(l)(2)(A)(i), ~~and whose~~
29 ~~family resources do not exceed standards that the department determines reasonable for purposes of the~~
30 ~~program.~~

1 (8) Subject to appropriations, the department may cooperate with and make grants to a nonprofit
2 corporation that uses donated funds to provide basic preventive and primary health care medical benefits
3 to children whose families are ineligible for the Montana medicaid program and who are ineligible for any
4 other health care coverage, are under 19 years of age, and are enrolled in school if of school age.

5 (9) A person described in subsection (7) must be provided continuous eligibility for medical
6 assistance, as authorized in 42 U.S.C. 1396a(e)(5) through a(e)(7).

7 (10) The department may establish resource and income standards of eligibility for mental health
8 services that are more liberal than the resource and income standards of eligibility for physical health
9 services. The standards for eligibility for mental health services may provide for eligibility for households
10 not eligible for medicaid with family income that does not exceed 200% of the federal poverty threshold
11 or that does not exceed a lesser amount determined in the discretion of the department. The department
12 may by rule specify under what circumstances deductions for medical expenses should be used to reduce
13 countable family income in determining eligibility. The department may also adopt rules establishing fees,
14 premiums, or copayments to be charged recipients for services. The fees, premiums, or copayments may
15 vary according to family income.

16 (11) An individual who is eligible for a program under this section and loses eligibility must be
17 enrolled in a program under 53-4-1004 without making reapplication if the circumstances for losing
18 eligibility qualify the individual for enrollment."

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20 NEW SECTION. **Section 4. Effective date.** [This act] is effective July 1, 2001.

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