

IN THE HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 201

BY HEALTH AND WELFARE COMMITTEE

AN ACT

1 RELATING TO PUBLIC ASSISTANCE; AMENDING SECTION 56-239, IDAHO CODE, TO RE-
2 VISE PROVISIONS REGARDING ELIGIBILITY REQUIREMENTS FOR CHIP PLAN B;
3 AMENDING SECTION 56-254, IDAHO CODE, TO REVISE PROVISIONS REGARDING
4 CERTAIN ELIGIBILITY REQUIREMENTS FOR MEDICAID AND TO MAKE TECHNICAL
5 CORRECTIONS; AMENDING CHAPTER 2, TITLE 56, IDAHO CODE, BY THE ADDITION
6 OF A NEW SECTION 56-269, IDAHO CODE, TO ESTABLISH PROVISIONS REGARDING
7 A CERTAIN MEDICAID STATE PLAN AMENDMENT; PROVIDING LEGISLATIVE INTENT;
8 AND DECLARING AN EMERGENCY.
9

10 Be It Enacted by the Legislature of the State of Idaho:

11 SECTION 1. That Section 56-239, Idaho Code, be, and the same is hereby
12 amended to read as follows:

13 56-239. CHIP PLAN B. (1) There is hereby created in the department a
14 CHIP Plan B that shall be made available by the department to eligible chil-
15 dren, as defined in section 56-238, Idaho Code, whose family's modified ad-
16 justed gross income is between one hundred fifty percent (150%) and ~~one hun-~~
17 ~~dred eighty-five percent (185%)~~ two hundred five percent (205%) of the fed-
18 eral poverty guidelines. The director shall implement the program by adopt-
19 ing rules recommended by the board of the Idaho individual high risk reinsur-
20 ance pool created in section 41-5502, Idaho Code, that authorize policies of
21 health insurance for children enrolled in the CHIP Plan B.

22 (2) There is hereby created a CHIP Plan B advisory board which shall ad-
23 vise the Idaho individual high risk reinsurance pool board concerning issues
24 related to the CHIP Plan B. The board shall consist of eight (8) members, four
25 (4) members to be appointed by the director and four (4) members to be ap-
26 pointed by the governor. At least two (2) members of the board shall be par-
27 ents of children who are eligible to participate in the CHIP Plan B.

28 SECTION 2. That Section 56-254, Idaho Code, be, and the same is hereby
29 amended to read as follows:

30 56-254. ELIGIBILITY FOR MEDICAL ASSISTANCE. The department shall make
31 payments for medical assistance to, or on behalf of, the following persons
32 eligible for medical assistance.

33 (1) The benchmark plan for low-income children and working-age adults
34 with no special health needs includes the following persons:

35 (a) Children in families whose family income does not exceed ~~one hun-~~
36 ~~dred eighty-five percent (185%)~~ two hundred five percent (205%) of the
37 federal poverty guideline and who meet age-related and other eligibil-
38 ity standards in accordance with department rule;

39 (b) Pregnant women of any age whose family income does not exceed ~~one~~
40 ~~hundred thirty-three percent (133%)~~ two hundred five percent (205%) of

1 the federal poverty guideline and who meet other eligibility standards
2 in accordance with department rule, or who meet the presumptive eligi-
3 bility guidelines in accordance with section 1920 of the social secu-
4 rity act;

5 (c) Infants born to medicaid-eligible pregnant women. Medicaid eligi-
6 bility must be offered throughout the first year of life as long as the
7 infant remains in the mother's household and she remains eligible, or
8 would be eligible if she were still pregnant;

9 (d) Adults in families with dependent children, as described in sec-
10 tion 1931 of the social security act, who meet the requirements in the
11 state's assistance to families with dependent children (AFDC) plan in
12 effect on July 16, 1996;

13 (e) Families who are provided six (6) to twelve (12) months of medicaid
14 coverage following loss of eligibility under section 1931 of the social
15 security act due to earnings, or four (4) months of medicaid coverage
16 following loss of eligibility under section 1931 of the social security
17 act due to an increase in child or spousal support; and

18 (f) All other mandatory groups as defined in title XIX of the social se-
19 curity act, if not listed separately in subsection (2) or (3) of this
20 section.

21 (2) The benchmark plan for persons with disabilities or special health
22 needs includes the following persons:

23 (a) Persons under age sixty-five (65) years eligible in accordance with
24 title XVI of the social security act, as well as persons eligible for aid
25 to the aged, blind and disabled (AABD) under titles I, X and XIV of the
26 social security act;

27 (b) Persons under age sixty-five (65) years who are in need of the ser-
28 vices of a licensed nursing facility, a licensed intermediate care fa-
29 cility for the developmentally disabled, a state mental hospital, or
30 home-based and community-based care whose income does not exceed three
31 hundred percent (300%) of the social security income (SSI) standard and
32 who meet the asset standards and other eligibility standards in accor-
33 dance with federal law and regulation, Idaho law and department rule;

34 (c) Certain disabled children described in 42 CFR 435.225 who meet re-
35 source limits for aid to the aged, blind and disabled (AABD) and income
36 limits for social security income (SSI) and other eligibility standards
37 in accordance with department rule;

38 (d) Persons under age sixty-five (65) years who are eligible for ser-
39 vices under both titles XVIII and XIX of the social security act;

40 (e) Children who are eligible under title IV-E of the social security
41 act for subsidized board payments, foster care, or adoption subsidies,
42 and children for whom the state has assumed temporary or permanent re-
43 sponsibility and who do not qualify for title IV-E assistance but are in
44 foster care, shelter or emergency shelter care, or subsidized adoption
45 and who meet eligibility standards in accordance with department rule;

46 (f) Eligible women under age sixty-five (65) years, with incomes at or
47 below two hundred percent (200%) of the federal poverty level, for can-
48 cer treatment pursuant to the federal breast and cervical cancer pre-
49 vention and treatment act of 2000;

1 (g) Low-income children and working-age adults under age sixty-five
 2 (65) years who qualify under subsection (1) of this section and who
 3 require the services for persons with disabilities or special health
 4 needs listed in section 56-255(3), Idaho Code;

5 (h) Persons over age sixty-five (65) years who choose to enroll in this
 6 state plan; and

7 (i) Effective January 1, 2018, children under age eighteen (18) years
 8 with serious emotional disturbance, as defined in section 16-2403,
 9 Idaho Code, in families whose income does not exceed three hundred
 10 percent (300%) of the federal poverty guideline and who meet other eli-
 11 gibility standards in accordance with department rule.

12 (3) The benchmark plan for persons over twenty-one (21) years of age who
 13 have medicare and medicaid coverage includes the following persons:

14 (a) Persons eligible in accordance with title XVI of the social secu-
 15 rity act, as well as persons eligible for aid to the aged, blind and dis-
 16 abled (AABD) under titles I, X and XIV of the social security act;

17 (b) Persons who are in need of the services of a licensed nursing fa-
 18 cility, a licensed intermediate care facility for the developmentally
 19 disabled, a state mental hospital, or home-based and community-based
 20 care whose income does not exceed three hundred percent (300%) of the
 21 social security income (SSI) standard and who meet the assets standards
 22 and other eligibility standards in accordance with federal and state
 23 law and department rule;

24 (c) Persons who are eligible for services under both titles XVIII and
 25 XIX of the social security act who have enrolled in the medicare pro-
 26 gram; and

27 (d) Persons who are eligible for services under both titles XVIII and
 28 XIX of the social security act and who elect to enroll in this state
 29 plan.

30 SECTION 3. That Chapter 2, Title 56, Idaho Code, be, and the same is
 31 hereby amended by the addition thereto of a NEW SECTION, to be known and des-
 32 ignated as Section 56-269, Idaho Code, and to read as follows:

33 56-269. STATE PLAN AMENDMENT -- POSTPARTUM MEDICAID COVERAGE. (1) The
 34 state shall amend its state plan to extend medicaid eligibility for twelve
 35 (12) months postpartum to individuals who, while pregnant, are eligible for
 36 and receive medicaid, in accordance with section 9812 of the American rescue
 37 plan act of 2021 and section 1902(e)(16) of the social security act.

38 (2) If federal financial participation for individuals identified in
 39 subsection (1) of this section is reduced or eliminated by more than ten per-
 40 cent (10%) following approval of the state plan amendment, then the senate
 41 and house of representatives health and welfare committees shall, as soon as
 42 practicable, review the effects of such reduction or elimination and make a
 43 recommendation to the legislature as to whether the eligibility extension
 44 granted by subsection (1) of this section should remain in effect. The re-
 45 view and recommendation described in this subsection shall be conducted by
 46 the date of adjournment of the regular legislative session following the
 47 date of reduction in or elimination of federal financial participation.

48 (3) The department of health and welfare is required and authorized to:

1 (a) Take such actions as are necessary to implement the provisions of
2 this section;

3 (b) Begin the application process for federal approval of the state
4 plan amendment discussed in subsection (1) of this section no later than
5 July 1, 2023; and

6 (c) Seek to maximize federal financial participation on medicaid cov-
7 erage for individuals identified in subsection (1) of this section.

8 SECTION 4. LEGISLATIVE INTENT. It is the intent of the Legislature that
9 the Department of Health and Welfare begin the application process for any
10 federal approval necessary to implement the provisions of this act no later
11 than July 1, 2023.

12 SECTION 5. An emergency existing therefor, which emergency is hereby
13 declared to exist, this act shall be in full force and effect on and after its
14 passage and approval.