



LAWS OF ALASKA

2010

Source
SB 13

Chapter No.

AN ACT

Relating to eligibility requirements for medical assistance for certain children and pregnant women; and providing for an effective date.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

THE ACT FOLLOWS ON PAGE 1

AN ACT

1 Relating to eligibility requirements for medical assistance for certain children and pregnant
2 women; and providing for an effective date.

3 _____

4 * **Section 1.** AS 47.07.020(b) is amended to read:

5 (b) In addition to the persons specified in (a) of this section, the following
6 optional groups of persons for whom the state may claim federal financial
7 participation are eligible for medical assistance:

8 (1) persons eligible for but not receiving assistance under any plan of
9 the state approved under 42 U.S.C. 1381 - 1383c (Title XVI, Social Security Act,
10 Supplemental Security Income) or a federal program designated as the successor to the
11 aid to families with dependent children program;

12 (2) persons in a general hospital, skilled nursing facility, or
13 intermediate care facility, who, if they left the facility, would be eligible for assistance
14 under one of the federal programs specified in (1) of this subsection;

1 (3) persons under 21 years of age who are under supervision of the
2 department, for whom maintenance is being paid in whole or in part from public
3 funds, and who are in foster homes or private child-care institutions;

4 (4) aged, blind, or disabled persons, who, because they do not meet
5 income and resources requirements, do not receive supplemental security income
6 under 42 U.S.C. 1381 - 1383c (Title XVI, Social Security Act), and who do not
7 receive a mandatory state supplement, but who are eligible, or would be eligible if
8 they were not in a skilled nursing facility or intermediate care facility to receive an
9 optional state supplementary payment;

10 (5) persons under 21 years of age who are in an institution designated
11 as an intermediate care facility for the mentally retarded and who are financially
12 eligible as determined by the standards of the federal program designated as the
13 successor to the aid to families with dependent children program;

14 (6) persons in a medical or intermediate care facility whose income
15 while in the facility does not exceed \$1,656 a month but who would not be eligible for
16 an optional state supplementary payment if they left the hospital or other facility;

17 (7) persons under 21 years of age who are receiving active treatment in
18 a psychiatric hospital and who are financially eligible as determined by the standards
19 of the federal program designated as the successor to the aid to families with
20 dependent children program;

21 (8) persons under 21 years of age and not covered under (a) of this
22 section, who would be eligible for benefits under the federal program designated as
23 the successor to the aid to families with dependent children program, except that they
24 have the care and support of both their natural and adoptive parents;

25 (9) pregnant women not covered under (a) of this section and who
26 meet the income and resource requirements of the federal program designated as the
27 successor to the aid to families with dependent children program;

28 (10) persons under 21 years of age not covered under (a) of this section
29 who the department has determined cannot be placed for adoption without medical
30 assistance because of a special need for medical or rehabilitative care and who the
31 department has determined are hard-to-place children eligible for subsidy under

1 AS 25.23.190 - 25.23.210;

2 (11) persons who can be considered under 42 U.S.C. 1396a(e)(3) (Title
3 XIX, Social Security Act, Medical Assistance) to be individuals with respect to whom
4 a supplemental security income is being paid under 42 U.S.C. 1381 - 1383c (Title
5 XVI, Social Security Act) because they meet all of the following criteria:

6 (A) they are 18 years of age or younger and qualify as disabled
7 individuals under 42 U.S.C. 1382c(a) (Title XVI, Social Security Act);

8 (B) the department has determined that

9 (i) they require a level of care provided in a hospital,
10 nursing facility, or intermediate care facility for the mentally retarded;

11 (ii) it is appropriate to provide their care outside of an
12 institution; and

13 (iii) the estimated amount that would be spent for
14 medical assistance for their individual care outside an institution is not
15 greater than the estimated amount that would otherwise be expended
16 individually for medical assistance within an appropriate institution;

17 (C) if they were in a medical institution, they would be eligible
18 for medical assistance under other provisions of this chapter; and

19 (D) home and community-based services under a waiver
20 approved by the federal government are either not available to them under this
21 chapter or would be inappropriate for them;

22 (12) disabled persons, as described in 42 U.S.C.
23 1396a(a)(10)(A)(ii)(XIII), who are in families whose income, as determined under
24 applicable federal regulations or guidelines, is less than 250 percent of the official
25 poverty line applicable to a family of that size according to the United States
26 Department of Health and Human Services, and who, but for earnings in excess of the
27 limit established under 42 U.S.C. 1396d(q)(2)(B), would be considered to be
28 individuals with respect to whom a supplemental security income is being paid under
29 42 U.S.C. 1381 - 1383c; a person eligible for assistance under this paragraph who is
30 not eligible under another provision of this section shall pay a premium or other cost-
31 sharing charges according to a sliding fee scale that is based on income as established

1 by the department in regulations;

2 (13) persons under 19 years of age who are not covered under (a) of
3 this section and whose household income does not exceed 200 [175] percent of the
4 federal poverty line as defined by the United States Department of Health and Human
5 Services and revised under 42 U.S.C. 9902(2);

6 (14) pregnant women who are not covered under (a) of this section and
7 whose household income does not exceed 200 [175] percent of the federal poverty line
8 as defined by the United States Department of Health and Human Services and revised
9 under 42 U.S.C. 9902(2);

10 (15) persons who have been diagnosed with breast or cervical cancer
11 and who are eligible for coverage under 42 U.S.C. 1396a(a)(10)(A)(ii)(XVIII).

12 * **Sec. 2.** AS 47.07.042(d) is amended to read:

13 (d) In addition to the requirements established under (a) and (b) of this section,
14 the department may require premiums or cost-sharing contributions from recipients
15 who are eligible for benefits under AS 47.07.020(b)(13) and whose household income
16 is between 150 and 200 [175] percent of the federal poverty line. If the department
17 requires premiums or cost-sharing contributions under this subsection, the department

18 (1) shall adopt in regulation a sliding scale for those premiums or
19 contributions based on household income;

20 (2) may not exceed the maximums allowed under federal law; and

21 (3) shall implement a system by which the department or its designee
22 collects those premiums or contributions.

23 * **Sec. 3.** This Act takes effect immediately under AS 01.10.070(c).