

HOUSE BILL NO. 260

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-FIRST LEGISLATURE - SECOND SESSION

BY REPRESENTATIVE COGHILL

Introduced: 1/10/00

Referred: Health, Education and Social Services, Finance

A BILL

FOR AN ACT ENTITLED

1 **"An Act relating to coverage of children and pregnant women under the medical**
2 **assistance program; and providing for an effective date."**

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

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 participation
7 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 intermediate
13 care facility, who, if they left the facility, would be eligible for assistance under one
14 of the federal programs specified in (1) of this subsection;

1 (3) persons under age 21 who are under supervision of the department,
2 for whom maintenance is being paid in whole or in part from public funds, and who
3 are in foster homes or private **child care** [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 under
6 42 U.S.C. 1381 - 1383c (Title XVI, Social Security Act), and who do not receive a
7 mandatory state supplement, but who are eligible, or would be eligible if they were not
8 in a skilled nursing facility or intermediate care facility to receive an optional state
9 supplementary payment;

10 (5) persons under age 21 who are in an institution designated as an
11 intermediate care facility for the mentally retarded and who are financially eligible as
12 determined by the standards of the federal program designated as the successor to the
13 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 300 percent of the supplemental security income
16 benefit rate under 42 U.S.C. 1381 - 1383c (Title XVI, Social Security Act) but who
17 would not be eligible for an optional state supplementary payment if they left the
18 hospital or other facility;

19 (7) persons under age 21 who are receiving active treatment in a
20 psychiatric hospital and who are financially eligible as determined by the standards of
21 the federal program designated as the successor to the **aid to families with dependent**
22 **children** [AID TO FAMILIES WITH DEPENDENT CHILDREN] program []];

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

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

30 (10) persons under age 21 not covered under (a) of this section who the
31 department has determined cannot be placed for adoption without medical assistance

1 because of a special need for medical or rehabilitative care and who the department
 2 has determined are hard-to-place children eligible for subsidy under AS 25.23.190 -
 3 25.23.220;

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

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

10 (B) the department has determined that

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

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

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

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

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

24 (12) disabled persons, as described in 42 U.S.C.
 25 1396a(a)(10)(A)(ii)(XIII), who are in families whose income, as determined under
 26 applicable federal regulations or guidelines, is less than 250 percent of the official
 27 poverty line applicable to a family of that size according to the federal Office of
 28 Management and Budget, and who, but for earnings in excess of the limit established
 29 under 42 U.S.C. 1396d(q)(2)(B), would be considered to be individuals with respect
 30 to whom a supplemental security income is being paid under 42 U.S.C. 1381 - 1383c;
 31 a person eligible for assistance under this paragraph who is not eligible under another

1 provision of this section shall pay a premium or other cost-sharing charges according
2 to a sliding fee scale that is based on income as established by the department in
3 regulations;

4 (13) persons under age 19 who are not covered under (a) of this section
5 and whose household income does not exceed 100 [200] percent of the federal poverty
6 guideline as defined by the federal office of management and budget and revised under
7 42 U.S.C. 9902(2);

8 (14) pregnant women who are not covered under (a) of this section and
9 whose household income does not exceed 100 [200] percent of the federal poverty line
10 as defined by the federal office of management and budget and revised under 42
11 U.S.C. 9902(2).

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

13 (a) Except as provided in **(b) and (c)** [(b) - (d)] of this section, the state plan
14 developed under AS 47.07.040 shall impose deductible, coinsurance, and copayment
15 requirements on persons eligible for assistance under this chapter to the maximum
16 extent allowed under federal law and regulations. The plan must provide that health
17 care providers shall collect the allowable charge. The department shall reduce
18 payments to each provider by the amount of the allowable charge. A provider may
19 not deny services because a recipient is unable to share costs, but an inability to share
20 costs imposed under this section does not relieve the recipient of liability for the costs.

21 * **Sec. 3.** AS 47.07.042(d) is repealed.

22 * **Sec. 4.** This Act takes effect July 1, 2000.