

HOUSE BILL NO. 245

IN THE LEGISLATURE OF THE STATE OF ALASKA

EIGHTEENTH LEGISLATURE - FIRST SESSION

BY REPRESENTATIVE ULMER

Introduced: 3/22/93

Referred: Health, Education & Social Services, Judiciary, Finance

A BILL

FOR AN ACT ENTITLED

1 "An Act expanding eligibility for Medicaid to individuals whose medical expenses
2 exceed the amount by which their income exceeds the otherwise applicable income
3 eligibility standard for Medicaid; modifying the priorities granted to eligible groups
4 of individuals under Medicaid; and providing for an effective date."

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

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

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

10 (1) persons eligible for but not receiving assistance under any plan of
11 the state approved under 42 U.S.C. 601 - 615 (Title IV-A, Social Security Act, Aid to
12 Families with Dependent Children) or 42 U.S.C. 1381 - 1383c (Title XVI, Social
13 Security Act, Supplemental Security Income);

14 (2) persons in a general hospital, skilled nursing facility or intermediate

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

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

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

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

16 (6) persons in a medical or intermediate care facility whose income
17 while in the facility does not exceed 300 percent of the supplemental security income
18 benefit rate under 42 U.S.C. 1381 - 1383c (Title XVI, Social Security Act) but who
19 would not be eligible for an optional state supplementary payment if they left the
20 hospital or other facility;

21 (7) persons under age 21 who are receiving active treatment in a
22 psychiatric hospital and who are financially eligible as determined by the standards of
23 42 U.S.C. 601 - 615 (Title IV-A, Social Security Act, Aid to Families with Dependent
24 Children);

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

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

1 (10) persons determined to be ineligible for medical assistance
2 under other provisions of this section or other laws solely because their incomes
3 exceed the income eligibility standard applicable to them under those provisions
4 or laws but whose expenses for medical care are more than the amount of excess
5 income, as determined by the department under regulations that comply with 42
6 U.S.C. 1396a(a)(10)(C) and 1396a(a)(17) and federal regulations adopted under
7 those paragraphs [REPEALED].

8 * Sec. 2. AS 47.07.035 is amended to read:

9 Sec. 47.07.035. PRIORITY OF MEDICAL ASSISTANCE. If the department
10 finds that the cost of medical assistance for all persons eligible under this chapter will
11 exceed the amount allocated in the state budget for that assistance for the fiscal year,
12 the department shall eliminate coverage for optional medical services and optionally
13 eligible groups of individuals in the following order:

- 14 (1) clinical social workers' services;
- 15 (2) psychologists' services;
- 16 (3) chiropractic services;
- 17 (4) advanced nurse practitioner services;
- 18 (5) adult dental services;
- 19 (6) emergency hospital services;
- 20 (7) treatment of speech, hearing, and language disorders;
- 21 (8) optometrists' services and eyeglasses;
- 22 (9) occupational therapy;
- 23 (10) mammography screening;
- 24 (11) prosthetic devices;
- 25 (12) medical supplies and equipment;
- 26 (13) targeted case management services;
- 27 (14) rehabilitative services for substance abusers and emotionally
28 disturbed or chronically mentally ill adults;
- 29 (15) clinic services;
- 30 (16) physical therapy;
- 31 (17) personal care services in a recipient's home;

1 (18) prescribed drugs;
2 (19) long-term care noninstitutional services;
3 (20) inpatient psychiatric facility services;
4 (21) intermediate care facility services for the mentally retarded;
5 (22) intermediate care facility services;
6 (23) individuals whose only basis for eligibility is under
7 AS 47.07.020(b)(10):

8 (24) individuals under age 21 who are not eligible for benefits under
9 the federal aid to families with dependent children program because they are not
10 deprived of one or more of their natural or adoptive parents;

11 (25) [(24)] skilled nursing facility services for persons under age 21;

12 (26) [(25)] aged, blind, and disabled individuals who, because they do
13 not meet the income requirements, do not receive supplemental security income under
14 Title XVI of the Social Security Act, but who are eligible, or would be eligible if they
15 were not in a skilled nursing facility or intermediate care facility, to receive an
16 optional state supplementary payment;

17 (27) [(26)] individuals in a hospital, skilled nursing facility, or
18 intermediate care facility whose income while in the facility does not exceed 300
19 percent of the supplemental security income benefit rate under Title XVI of the Social
20 Security Act, but who, because of income, are not eligible for the optional state
21 supplementary payment;

22 (28) [(27)] individuals under age 21 under supervision of the
23 department, for whom maintenance is being paid in whole or in part from public
24 money and who are in foster homes or private child-care institutions.

25 * Sec. 3. TRANSITION PERIOD. The Department of Health and Social Services shall
26 promptly develop the administrative procedures necessary to implement the changes to the
27 Medicaid program made by secs. 1 - 2 of this Act.

28 * Sec. 4. Section 3 of this Act takes effect July 1, 1993.

29 * Sec. 5. Sections 1 and 2 of this Act take effect January 1, 1994.