



Senate

General Assembly

File No. 311

February Session, 2000

Substitute Senate Bill No. 424

Senate, March 30, 2000

The Committee on Public Health reported through SEN. HARP of the 10th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

An Act Concerning The HUSKY Plans For Children's Health Insurance.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsection (a) of section 17b-294 of the general statutes is
2 repealed and the following is substituted in lieu thereof:

3 (a) The commissioner shall, within available appropriations,
4 establish two supplemental health insurance programs, to be known as
5 HUSKY Plus programs, for enrollees of [the subsidized portion of] the
6 HUSKY Plan, Part B₂ [with family incomes which do not exceed three
7 hundred per cent of the federal poverty level,] whose medical needs
8 cannot be accommodated within the basic benefit package offered
9 enrollees. One program shall supplement coverage for those medically
10 eligible enrollees with intensive physical health needs and one shall
11 supplement coverage for those medically eligible enrollees with
12 intensive behavioral health needs. No waiting period for the approval
13 of an application or the commencement of coverage shall be imposed

14 under the HUSKY Plus programs.

15 Sec. 2. Subsection (a) of section 17b-297 of the general statutes is
16 repealed and the following is substituted in lieu thereof:

17 (a) The commissioner, in consultation with the Children's Health
18 Council, the Medicaid Managed Care Council and Infoline of
19 Connecticut, shall develop mechanisms for outreach for the HUSKY
20 Plan, Part A and Part B, including, but not limited to, development of
21 mail-in applications and appropriate outreach materials through the
22 Department of Revenue Services, the Labor Department, the
23 Department of Social Services, the Department of Public Health, the
24 Department of Children and Families and the Office of Protection and
25 Advocacy for Persons with Disabilities. Such outreach materials shall
26 include, but not be limited to, informational notices or pamphlets
27 regarding the HUSKY Plan, Part A and Part B, that the commissioner
28 shall make available, or cause to be made available, to any employer
29 that does not provide health insurance benefits to its employees. Such
30 informational notices or pamphlets shall be furnished to such
31 employers beginning not later than January 1, 2001, at no cost to such
32 employers.

33 Sec. 3. Section 17b-299 of the general statutes is amended by adding
34 subsection (d) as follows:

35 (NEW) (d) Notwithstanding the provisions of subsections (b) and (c)
36 of this section, no waiting period for the approval of an application or
37 the commencement of coverage shall be imposed under the HUSKY
38 Plan, Part B, in the case of any child with a disability.

39 Sec. 4. (NEW) On and after January 1, 2001, any employer that does
40 not provide health insurance benefits to its employees shall distribute
41 to each new employee an informational notice or pamphlet regarding
42 the HUSKY Plan, Part A and Part B, that is furnished by the
43 Commissioner of Social Services pursuant to section 17b-297 of the

44 general statutes, as amended by this act.

PH Committee Vote: Yea 25 Nay 0 JFS

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

OFA Fiscal Note

State Impact: Minimal Cost

Affected Agencies: Department of Social Services

Municipal Impact: None

Explanation

State Impact:

The bill would allow children in families' enrolled in HUSKY B whose income exceeds three hundred percent of the federal poverty level to buy into the HUSKY Plus program. The HUSKY Plus programs provide health insurance coverage for individuals with physical and behavioral health needs. Coverage under HUSKY B is available to children over 300% of the poverty limit based upon full payment by the client at the current premium levels. There are currently sixty-nine children enrolled in the HUSKY Plus Physical program (Yale Center for Children with Special Health Care Needs-28, Connecticut Children's Medical Center-41) and six children enrolled in HUSKY Plus Behavioral program. Families with income above 300% of the federal poverty level who choose to buy into HUSKY Plus will be required to pay the full cost of any HUSKY Plus services. Therefore it is not expected that any additional cost to the state will result.

The Department of Social Services is also required under the bill to make available to employers, who do not provide health insurance to

its employees, informational notices or pamphlets regarding the HUSKY Plan, Part A and Part B. This will result in increased costs to the department. However, these costs are expected to be minimal and will require no additional appropriations.

OLR Bill Analysis

sSB 424

AN ACT CONCERNING THE OUTREACH PROGRAM FOR THE HUSKY PLANS FOR CHILDREN'S HEALTH INSURANCE.**SUMMARY:**

This bill opens the HUSKY Plus programs to medically eligible children in families enrolled in HUSKY Plan, Part B whose incomes are above 300% of the federal poverty level (FPL, 300% currently equals \$42,450 for a family of three). Current law limits participation in HUSKY Plus to children in families with incomes between 185% and 300% of FPL. Families with incomes over 300% of FPL who enroll in Part B must pay 100% of the premium cost.

The bill prohibits imposing any waiting period on HUSKY Plus or, in the case of a child with a disability, on HUSKY, Part B applications or coverage. By law, The Department of Social Services (DSS) commissioner can deny an application if the child was covered by an employer-sponsored plan within the past six months. But she can approve HUSKY coverage despite prior coverage in specific circumstances.

The bill requires DSS to make HUSKY Plan outreach materials available without charge to employers that do not provide health insurance to employees. It must do this by January 1, 2001, at which time the employers must begin distributing the information to new employees. By law DSS must, within available appropriations, contract with severe need schools, community organizations, and its point of entry service provider for outreach, public education, and recruitment.

EFFECTIVE DATE: October 1, 2000

BACKGROUND

Husky Plus

HUSKY Plus programs supplement Part B coverage for children with intensive medical and behavioral health needs. A child is medically eligible if he meets acuity standards or criteria that address the child’s diagnosis, functional impairment, and intensive service needs. DSS establishes these criteria based on recommendations by two medical panels.

Husky Plan, Part B Waiting Periods

Children are ineligible for HUSKY to the extent they are insured. DSS can deny an application if the child was covered by an employer-sponsored plan within the past six months. The commissioner can extend this period to 12 months if she finds that six months does not discourage coverage discontinuance.

But the commissioner can approve an applicant under the following circumstances, even though he was covered by an employer’s plan within six months of applying:

1. loss of job for other than voluntary termination;
2. a parent’s death;
3. change to a new employer that does not cover dependents;
4. change of address that makes employer-sponsored coverage unavailable;
5. the employer discontinues coverage for all employees;
6. federal period for post-employment coverage continuation (COBRA) expires;
7. self-employment;
8. long-term disability results in health coverage termination;
9. economic hardship for employee or employer results in termination of dependent coverage; and
10. substantial reduction in lifetime medical benefits or benefit categories available to an employee or dependents through an employer-sponsored plan.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute
Yea 25 Nay 0