



General Assembly

February Session, 2012

Raised Bill No. 425

LCO No. 2214

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Referred to Committee on Public Health

Introduced by:
(PH)

AN ACT CONCERNING A BASIC HEALTH PROGRAM.

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

1 Section 1. (NEW) (*Effective from passage*) (a) On and after January 1,
2 2014, the Special Advisor to the Governor on Healthcare Reform, in
3 consultation with the Commissioner of Social Services, shall, within
4 available appropriations, establish and implement a basic health
5 program in accordance with Section 1331 of the federal Affordable
6 Care Act. On and after January 1, 2014, all individuals under sixty-five
7 years of age with income not exceeding two hundred per cent of the
8 federal poverty level, and who are ineligible for medical assistance
9 pursuant to Title XIX of the Social Security Act, and otherwise eligible
10 for medical assistance under the Affordable Care Act, shall be eligible
11 for medical assistance under a basic health program. For purposes of
12 this section, "Affordable Care Act" means the Patient Protection and
13 Affordable Care Act, P.L. 111-148, as amended by the Health Care and
14 Education Reconciliation Act, P.L. 111-152, as both may be amended
15 from time to time, and regulations adopted thereunder.

16 (b) Medical assistance provided through the basic health program

17 shall include the benefits, limits on cost-sharing and other consumer
18 safeguards that apply to medical assistance provided in accordance
19 with Title XIX of the Social Security Act, unless the special advisor
20 determines that the cost of medical assistance provided to enrollees in
21 the basic health program will exceed the federal subsidies available to
22 the state to fund the program. If the special advisor so determines, the
23 special advisor, in consultation with the commissioner, shall develop a
24 plan for the basic health program that maximizes benefits and
25 minimizes cost-sharing, utilizing funds available from federal
26 subsidies to fund the program.

27 (c) Individuals enrolled in the basic health program shall include
28 adults with incomes exceeding one hundred thirty-three per cent of the
29 federal poverty level, but not exceeding two hundred per cent of the
30 federal poverty level, who would otherwise be eligible for HUSKY
31 Plan, Part A benefits.

32 (d) To the extent that federal funds received for the basic health
33 program exceed the cost of medical assistance that would otherwise be
34 provided to program enrollees pursuant to Title XIX of the Social
35 Security Act, the excess of such federal funds shall, to the extent
36 allowed by federal law, be used to increase reimbursement rates for
37 providers serving individuals receiving benefits pursuant to the basic
38 health program. The Commissioner of Social Services, in consultation
39 with the special advisor, shall increase reimbursement rates pursuant
40 to this section so as to maximize access to needed health care services.
41 The Commissioner of Social Services, in consultation with the special
42 advisor, shall establish a committee charged with making
43 recommendations to (1) keep provider rates competitive, (2) provide
44 payment incentives that increase access to primary care offices as an
45 alternative to emergency room care, and (3) streamline paperwork. The
46 committee shall be comprised of representatives of the Department of
47 Social Services, Office of Health Reform and Innovation and providers
48 who participate in the basic health program and Medicaid.

49 (e) The Special Advisor to the Governor on Healthcare Reform, in
50 consultation with the Commissioner of Social Services, shall take all
51 necessary actions to maximize federal funding and seek any necessary
52 approvals from the federal government in connection with the
53 establishment of a basic health program.

54 Sec. 2. (*Effective from passage*) (a) Not later than October 1, 2012, the
55 Special Advisor to the Governor on Healthcare Reform, in consultation
56 with the Commissioner of Social Services, shall submit a plan for the
57 establishment and implementation of a basic health program to the
58 joint standing committees of the General Assembly having cognizance
59 of matters relating to public health, human services, insurance and real
60 estate, and appropriations and the budgets of state agencies for
61 approval.

62 (b) Not later than thirty days after the date of their receipt of such
63 plan, the joint standing committees shall hold a public hearing. At the
64 conclusion of a public hearing the joint standing committees shall
65 advise the special advisor of their approval, denial or modifications, if
66 any, of the plan.

67 (c) If the joint standing committees do not concur, the committee
68 chairpersons shall appoint a committee of conference which shall be
69 composed of three members from each joint standing committee. At
70 least one member appointed from each joint standing committee shall
71 be a member of the minority party. The report of the committee of
72 conference shall be made to each joint standing committee, which shall
73 vote to accept or reject the report. The report of the committee of
74 conference may not be amended. If any joint standing committee
75 rejects the report of the committee of conference, that joint standing
76 committee shall notify the special advisor of the rejection and the
77 special advisor's plan shall be deemed approved. If the joint standing
78 committees accept the report, the committee having cognizance of
79 matters relating to appropriations and the budgets of state agencies
80 shall advise the special advisor of their approval, denial or

81 modifications, if any, of the special advisor's plan. If the joint standing
82 committees do not so advise the special advisor during the thirty-day
83 period, the plan shall be deemed approved. Any plan submitted by the
84 special advisor, pursuant to this section, shall be in accordance with
85 the approval or modifications, if any, of the joint standing committees
86 of the General Assembly having cognizance of matters relating to
87 public health, human services, insurance and real estate, and
88 appropriations and the budgets of state agencies.

89 Sec. 3. Subsection (a) of section 17b-261 of the 2012 supplement to
90 the general statutes is repealed and the following is substituted in lieu
91 thereof (*Effective from passage*):

92 (a) Medical assistance shall be provided for any otherwise eligible
93 person whose income, including any available support from legally
94 liable relatives and the income of the person's spouse or dependent
95 child, is not more than one hundred forty-three per cent, pending
96 approval of a federal waiver applied for pursuant to subsection (e) of
97 this section, of the benefit amount paid to a person with no income
98 under the temporary family assistance program in the appropriate
99 region of residence and if such person is an institutionalized
100 individual as defined in Section 1917(c) of the Social Security Act, 42
101 USC 1396p(c), and has not made an assignment or transfer or other
102 disposition of property for less than fair market value for the purpose
103 of establishing eligibility for benefits or assistance under this section.
104 Any such disposition shall be treated in accordance with Section
105 1917(c) of the Social Security Act, 42 USC 1396p(c). Any disposition of
106 property made on behalf of an applicant or recipient or the spouse of
107 an applicant or recipient by a guardian, conservator, person
108 authorized to make such disposition pursuant to a power of attorney
109 or other person so authorized by law shall be attributed to such
110 applicant, recipient or spouse. A disposition of property ordered by a
111 court shall be evaluated in accordance with the standards applied to
112 any other such disposition for the purpose of determining eligibility.
113 The commissioner shall establish the standards for eligibility for

114 medical assistance at one hundred forty-three per cent of the benefit
115 amount paid to a family unit of equal size with no income under the
116 temporary family assistance program in the appropriate region of
117 residence. Except as provided in section 17b-277, as amended by this
118 act, the medical assistance program shall provide coverage to persons
119 under [the age of] nineteen years of age with family income up to one
120 hundred eighty-five per cent of the federal poverty level without an
121 asset limit and to persons under [the age of] nineteen years of age and
122 their parents and needy caretaker relatives, who qualify for coverage
123 under Section 1931 of the Social Security Act, with family income up to
124 one hundred eighty-five per cent of the federal poverty level without
125 an asset limit. On and after January 1, 2014, and contingent upon
126 implementation of a basic health program that includes the same
127 benefits, limits on cost sharing and other consumer safeguards that
128 apply to medical assistance provided in accordance with Title XIX of
129 the Social Security Act, the medical assistance program shall continue
130 to provide coverage to persons under nineteen years of age with
131 family income up to one hundred eighty-five per cent of the federal
132 poverty level without an asset limit. On and after January 1, 2014, and
133 upon implementation of the basic health program, coverage shall be
134 provided to parents and needy caretaker relatives of persons under
135 nineteen years of age, who qualify for coverage under Section 1931 of
136 the Social Security Act, with family income up to one hundred thirty-
137 three per cent of the federal poverty level without an asset limit. Such
138 levels shall be based on the regional differences in such benefit
139 amount, if applicable, unless such levels based on regional differences
140 are not in conformance with federal law. Any income in excess of the
141 applicable amounts shall be applied as may be required by said federal
142 law, and assistance shall be granted for the balance of the cost of
143 authorized medical assistance. The Commissioner of Social Services
144 shall provide applicants for assistance under this section, at the time of
145 application, with a written statement advising them of (1) the effect of
146 an assignment or transfer or other disposition of property on eligibility
147 for benefits or assistance, (2) the effect that having income that exceeds

148 the limits prescribed in this subsection will have with respect to
149 program eligibility, and (3) the availability of, and eligibility for,
150 services provided by the Nurturing Families Network established
151 pursuant to section 17b-751b. Persons who are determined ineligible
152 for assistance pursuant to this section shall be provided a written
153 statement notifying such persons of their ineligibility and advising
154 such persons of the availability of HUSKY Plan, Part B health
155 insurance benefits.

156 Sec. 4. Subsection (a) of section 17b-277 of the general statutes is
157 repealed and the following is substituted in lieu thereof (*Effective from*
158 *passage*):

159 (a) The Commissioner of Social Services shall provide, in accordance
160 with federal law and regulations, medical assistance under the
161 Medicaid program to needy pregnant women whose families have an
162 income not exceeding two hundred fifty per cent of the federal poverty
163 level. On and after January 1, 2014, and contingent upon
164 implementation of a basic health program that includes the same
165 benefits, limits on cost sharing and other consumer safeguards that
166 apply to medical assistance provided in accordance with Title XIX of
167 the Social Security Act providing medical coverage to individuals with
168 family income greater than one hundred thirty-three per cent of the
169 federal poverty level and not exceeding two hundred per cent of the
170 federal poverty level, the commissioner shall provide, in accordance
171 with federal law, medical assistance under the Medicaid program to
172 needy pregnant women whose families have an income not exceeding
173 two hundred fifty per cent of the federal poverty level.

174 Sec. 5. (*Effective from passage*) (a) For the fiscal years ending June 30,
175 2014, and June 30, 2015, the sum of thirty-six million dollars, reflecting
176 fifty per cent of any projected savings from reducing HUSKY Plan,
177 Part A adult coverage to those with family incomes greater than one
178 hundred thirty-three per cent of the federal poverty level and not
179 exceeding two hundred per cent of the federal poverty level, is

180 appropriated to the Department of Social Services for the state basic
 181 health program.

182 (b) Funds appropriated to the Department of Social Services under
 183 this section shall be used (1) to provide the same benefits and limits on
 184 cost-sharing in the state basic health program as apply to medical
 185 assistance provided in accordance with Title XIX of the Social Security
 186 Act, and (2) to increase reimbursement rates for providers serving
 187 individuals receiving benefits pursuant to the basic health plan.
 188 Reimbursement rates shall be increased pursuant to this section so as
 189 to maximize individuals' access to needed health care services.

190 Sec. 6. (NEW) (*Effective from passage*) There is established an account
 191 to be known as the "basic health program account", which shall be a
 192 separate, nonlapsing account within the General Fund. The account
 193 shall contain any moneys required by law to be deposited in the
 194 account. Moneys in the account shall be expended by the
 195 Commissioner of Social Services, in consultation with the Special
 196 Advisor to the Governor on Healthcare Reform, for the purposes of
 197 operating a basic health plan in conformance with Section 1331 of the
 198 Affordable Care Act.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	New section
Sec. 2	<i>from passage</i>	New section
Sec. 3	<i>from passage</i>	17b-261(a)
Sec. 4	<i>from passage</i>	17b-277(a)
Sec. 5	<i>from passage</i>	New section
Sec. 6	<i>from passage</i>	New section

Statement of Purpose:

To establish a basic health program providing coverage for persons under sixty-five years of age with family income up to two hundred per cent of the federal poverty level.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]