



Senate

General Assembly

File No. 115

January Session, 2021

Substitute Senate Bill No. 911

Senate, March 23, 2021

The Committee on Human Services reported through SEN. MOORE of the 22nd Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT REQUIRING THE STATE TO PROVIDE MEDICAL ASSISTANCE FOR PRENATAL CARE.

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

1 Section 1. (NEW) (*Effective from passage*) As used in this section and
2 section 17b-292 of the general statutes, as amended by this act, "unborn
3 child option" means a state option available under the Children's Health
4 Insurance Program pursuant to Title XXI of the Social Security Act, as
5 amended from time to time, that allows states to consider an unborn
6 child a low-income child eligible for coverage of prenatal care if other
7 conditions of eligibility under the Children's Health Insurance Program
8 are met. Not later than thirty days after the effective date of this section,
9 the Commissioner of Social Services shall amend the state plan for the
10 Children's Health Insurance Program under Title XXI of the Social
11 Security Act, as amended from time to time, to provide medical
12 assistance for prenatal care through the "unborn child option".

13 Sec. 2. Subsection (d) of section 17b-292 of the general statutes is
14 repealed and the following is substituted in lieu thereof (*Effective from*

15 *passage*):

16 (d) Not later than thirty days after the effective date of this section,
 17 the Commissioner of Social Services shall amend the state plan for the
 18 Children's Health Insurance Program under Title XXI of the Social
 19 Security Act, as amended from time to time, to provide medical
 20 assistance for prenatal care through the "unborn child option". A
 21 newborn child who otherwise meets the eligibility criteria for HUSKY B
 22 shall be eligible for benefits retroactive to his or her date of birth,
 23 provided an application is filed on behalf of the child not later than
 24 thirty days after such date. Any uninsured child born in a hospital in
 25 this state or in a border state hospital shall be enrolled on an expedited
 26 basis in HUSKY B, provided (1) the parent or caretaker relative of such
 27 child resides in this state, and (2) the parent or caretaker relative of such
 28 child authorizes enrollment in the program. The commissioner shall pay
 29 any premium cost such household would otherwise incur for the first
 30 four months of coverage.

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>	17b-292(d)

Statement of Legislative Commissioners:

In Section 2, "pursuant to" was changed to "under" for consistency with the last sentence in Section 1.

HS *Joint Favorable Subst. -LCO*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 22 \$	FY 23 \$
Social Services, Dept.	GF - Cost	See Below	See Below

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill results in an annual cost to the Department of Social Services (DSS) of at least \$6.6 million associated with providing medical assistance for prenatal care through a state plan option under the Children's Health Insurance Program (HUSKY B). This is estimated to impact (1) 450 individuals per year at an average gross cost of approximately \$13,000 per person, and (2) 1,500 undocumented citizens at an average gross cost of approximately \$8,600 per person.¹ Assuming the state receives 65% federal reimbursement, the state will incur new costs of approximately \$6.6 million annually.²

The actual cost to the state will depend on the number of individuals assisted and the rate used for such services.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to rates paid and the number of applicable cases.

¹ Rate reflects prenatal costs as labor and delivery services are currently provided to undocumented citizens under emergency Medicaid coverage.

² Gross costs are estimated at \$18.8 million; 65% federal financial participation assumes funding is available under the State's CHIP allotment

OLR Bill Analysis**SB 911*****AN ACT REQUIRING THE STATE TO PROVIDE MEDICAL ASSISTANCE FOR PRENATAL CARE.*****SUMMARY**

This bill requires the Department of Social Services (DSS) commissioner to amend the Children's Health Insurance Program (CHIP) state plan to provide medical assistance for prenatal care through the "unborn child option." This is a state option that allows states to consider an unborn child a low-income child eligible for coverage of prenatal care if other CHIP eligibility requirements are met. According to the federal Centers for Medicare and Medicaid Services, the requirement to meet other CHIP eligibility criteria applies to the child and not the mother.

The bill requires the commissioner to amend the CHIP plan within 30 days of the bill's passage. CHIP is jointly funded by the state and federal government and is administered by DSS according to federal requirements. The state provides CHIP coverage under HUSKY B, which covers children in families with household incomes between 196% and 318% of the federal poverty limit.

EFFECTIVE DATE: Upon passage

COMMITTEE ACTION

Human Services Committee

Joint Favorable

Yea 13 Nay 6 (03/09/2021)