## **Senate Study Bill 3098**

## **Bill Text**

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           Section 1. Section 514I.4, subsection 4, Code 1999, is
  1 2 amended to read as follows:
         4. The department shall do or shall provide for all of the
    4 following:
         a. Develop a program application form not to exceed two
    6 pages in length, which is consistent with the rules of the
    7 board, which is easy to understand, complete, and concise, and
  1 8 which, to the greatest extent possible, coordinates with the
  1 9 medical assistance program.
  1 10
         b. Establish the family cost sharing
  amount, based on a
 1 11
 sliding fee scale, if established by

    amounts with the approval

 1 12 of the board.
         c. Perform periodic, random reviews of enrollee
  1 14 applications to ensure compliance with program eligibility and
  1 15 enrollment policies. Quality assurance reports shall be made
  1 16 to the board and the department based upon the data maintained
  1 17 by the administrative contractor.
 1 18
- d. Perform other duties as determined by the department
 1 19 with the approval of the board.
         Sec. 2. Section 514I.5, subsection 7, paragraphs d and e,
  1 21 Code Supplement 1999, are amended to read as follows:
         d. Develop, with the assistance of the department, an
  1 23 outreach plan, and provide for periodic assessment of the
  1 24 effectiveness of the outreach plan. The plan shall provide
  1 25 outreach to families of children likely to be eligible for
  1 26 assistance under the program, to inform them of the
  1 27 availability of and to assist the families in enrolling
  1 28 children in the program. The outreach efforts may include,
  1 29 but are not limited to,
  a comprehensive statewide media
  1 30
 campaign,
- solicitation of cooperation from programs, agencies,
  1 31 and other persons who are likely to have contact with eligible
  1 32 children, including but not limited to those associated with
  1 33 the educational system, and the development of community plans
  1 34 for outreach and marketing.
  1 35
         e. In consultation with the clinical advisory committee,
 select a single, nationally recognized
- <u>develop a</u> functional
  2 2 health assessment form for an initial assessment of
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<del>eligible</del>
- children participating in the program, establish a
 2 4 baseline for comparison purposes, and develop appropriate
  2 5 indicators to measure the health status of
 eligible
- children
 2 6 participating in the program.
         Sec. 3. Section 514I.5, subsection 7, paragraph i, Code
 2 8 Supplement 1999, is amended by striking the paragraph.
         Sec. 4. Section 514I.5, subsection 7, paragraph 1,
 2 10 unnumbered paragraph 1, Code Supplement 1999, is amended to
 2 11 read as follows:
         Establish an advisory committee to make recommendations to
 2 12
 2 13 the board and to the general assembly
 on or before
- by January
 2 14 1,
 1999,
- annually concerning the provision of health insurance
 2 15 coverage to children with special health care needs under the
 2 16 program. The committee shall include individuals with
 2 17 experience in, knowledge of, or expertise in this area. The
 2 18 recommendations shall address, but are not limited to, all of
 2 19 the following:
 2 20
         Sec. 5. Section 514I.5, subsection 8, paragraphs h and m,
 2 21 Code Supplement 1999, are amended to read as follows:
 2 22 h. The amount of any cost sharing under the program which
 2 23 shall be assessed
 on a sliding fee scale
- based on family
 2 24 income, which provides for a minimum amount of cost sharing,
 2 25 and which complies with federal law.
         m. The reasons allowed for approval of an application in
 2 27 cases in which prior employer-sponsored coverage ended less
 2 28 than six months prior to the determination of eligibility for
 2 29 the HAWK-I program. The reasons established by rule shall
 2 30 include, but are not limited to, all of the following:
 2 31
          (1) Loss of employment due to factors other than voluntary
 2 32 termination.
 2 33
  (2) Death of a parent.
 2 34
- (2) Change in employment to a new employer that does
 2 35 not provide an option for dependent coverage.
 (4)
 (3) Change of address so that no employer-sponsored
 3 2 coverage is available.
 3 3
 (4) Discontinuation of health benefits to all
 3 4 employees of the applicant's employer.
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(5) Expiration of the coverage periods established by
  3 6 the federal Consolidated Omnibus Budget Reconciliation Act of
 3 7 1986, Pub. L. No. 99-272, as amended.
 (6) Self-employment.
  3 10
  disability.
  3 11
 (9)

    (7) Termination of dependent coverage due to an

  3 12 extreme economic hardship on the part of
- the employee
  3 13
 or the employer
-, as determined by rule.
  3 14
       Substantial reduction in either
  3 15
  benefits or benefit category available to an employee and
 dependents under an employer's health care plan.
         If the board determines that the allowance of the six-month
  3 18 period from the time of dropping coverage to be eligible for
  3 19 participation in the HAWK-I program is insufficient to
  3 20 effectively deter applicants or employers of applicants from
  3 21 discontinuing employer-sponsored dependent care coverage for
  3 22 the purpose of participation in the HAWK-I program, the board
  3 23 may adopt rules to extend the time period to a period not to
  3 24 exceed twelve months.
          Sec. 6. Section 514I.6, subsection 3, Code 1999, is
  3 26 amended by striking the subsection.
          Sec. 7. Section 514I.7, subsection 2, paragraph c, Code
  3 28 Supplement 1999, is amended to read as follows:
         c. Forward names of children who appear to be eligible for
  3 30 medical assistance
 or other public health insurance coverage
  3 31
  to local
 to the department of human services
  offices or other
  3 32
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for follow up and retain
 the
  3 33 identifying data on children who are referred.
          Sec. 8. Section 5141.7, subsection 2, paragraph h, Code
  3 35 Supplement 1999, is amended by striking the paragraph.
         Sec. 9. Section 514I.8, subsection 2, paragraphs c and e,
  4 2 Code 1999, are amended to read as follows:
         c. Is a member of a family whose
 adjusted gross
- income
  4 4 does not exceed one hundred eighty-five percent of the federal
  4 5 poverty level, as defined in 42 U.S.C. } 9902(2), including
  4 6 any revision required by such section.
         e. Is not currently covered under or was not covered
  4 8 within the prior six months under a group health plan as
  4 9 defined in 42 U.S.C. } 300gg-91(a)(1)
 or other health benefit
  4 10
 <del>plan</del>
-, unless
      coverage was involuntarily
  4 11
 dropping the coverage is
- allowed by rule of the board.
          Sec. 10. Section 514I.10, Code 1999, is amended to read as
  4 12
  4 13 follows:
          514I.10 COST SHARING.
  4 15
          1. Cost sharing for eligible children whose family
  4 16
 adjusted gross
- income is at or below one hundred fifty percent
  4 17 of the federal poverty level shall not exceed the standards
  4 18 permitted under 42 U.S.C. } 1396(o)(a)(3) or } 1396(o)(b)(1).
  4 19
          2. Cost sharing for eligible children whose family
  4 20
 adjusted gross
- income is between one hundred fifty percent and
  4 21 one hundred eighty-five percent of the federal poverty level
  4 22 shall include a premium or copayment amount which is at least
  4 23 a minimum amount but which does not exceed five percent of the
  4 24 annual family
 adjusted gross
- income. The amount of the
  4 25 premium or the copayment amount shall be based on
 a sliding
  4 26
            established by rule which is based
family
  4 27
  adjusted gross
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    income and

 the
size
 of the family
 4 28
                                EXPLANATION
 4 29
         This bill amends portions of the Code relating to the
 4 30 healthy and well kids in Iowa (HAWK-I) program.
 4 31
         The bill deletes the requirement that the department of
 4 32 human services (DHS) establish family cost sharing based on a
 4 33 sliding fee scale. The new language reflects current practice
 4 34 which is establishment of a cost sharing amount approved by
 4 35 the HAWK-I board. The bill also directs DHS to perform
    1 periodic, random reviews of enrollee applications to ensure
 5
    2 program compliance. Quality assurance reports are to be made
 5
    3 to the board and to DHS based upon the data maintained by the
 5
    4 administrative contractor of the program.
 5
         The bill eliminates the requirement that the outreach
 5
    6 efforts developed by the board include a comprehensive
    7 statewide media campaign. The bill directs the board to
    8 develop a functional health assessment form rather than
 5 9 selecting a single, nationally recognized assessment form for
 5 10 children participating in the program. The bill eliminates
 5 11 the requirement that the board perform periodic random reviews
 5 12 of enrollee applications to assure program compliance, as this
 5 13 function is given to the department under the bill. The bill
 5 14 also directs the advisory committee on children with special
 5 15 health care needs to make recommendations annually by January
 5 16 1, rather than only one time by January 1, 1999.
 5 17
         The bill eliminates, as reasons allowed for approval of an
 5 18 application in cases in which prior employer-sponsored
 5 19 coverage ended less than six months prior to determination of
 5 20 eligibility for the program, the death of a parent,
 5 21 termination of health benefits due to a long-term disability,
 5 22 and a substantial reduction in either lifetime medical
 5 23 benefits or benefit category available to an employee and
 5 24 dependents under an employer's health care plan. Another
 5 25 existing reason for approval of an application under these
 5 26 circumstances is amended so that termination of dependent
 5 27 coverage due to an extreme economic hardship on the part of
 5 28 only the employee, and not on the part of either the employee
 5 29 or employer, is reason to allow approval of an application.
 5 30 The bill also eliminates a requirement that participating
 5 31 insurers submit a marketing plan to the HAWK-I board
 5 32 consistent with the board's outreach plan, for approval by the
 5 33 board.
 5 34
         The bill amends the directive to the administrative
 5 35 contractor to forward names of children who appear to be
    1 eligible for health insurance coverage, other than medical
    2 assistance, to local offices of DHS or other appropriate
    3 persons, and limits the directive to forwarding the names of
    4 children who appear to be eligible for medical assistance only
    5 to the state offices of DHS. The bill also eliminates the
    6 directive to the administrative contractor to make program
    7 applications available through the mail and through local
    8 sites, as determined by DHS, including to schools, local
   9 health departments, local department of human services
 6 10 offices, and other locations.
         The bill also removes the reference to "adjusted gross
 6 12 income" in establishing eligibility for the program, and
 6 13 refers only to income, which is defined by rule.
 6 14 LSB 5240DP 78
 6 15 pf/qq/8.1
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