HANSEN, CHAIR Johnson Osterhaus

HSB 49

COMMERCE AND REGULATION

SENATE/HOUSE FILE 382

BY (PROPOSED DEPARTMENT OF HUMAN ______ SERVICES BILL)

Passed	Senate, Dat	e	Passed	House,	Date
Vote:	Ayes	Nays	Vote:	Ayes	Nays
	- Appro	ved			_

A BILL FOR

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1 Section 1. Section 514I.4, subsection 4, Code 2001, is 2 amended to read as follows:

3 4. The department shall do or shall provide for all of the 4 following:

5 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 8 which, to the greatest extent possible, coordinates with the 9 medical assistance program.

b. Establish the family cost sharing amount,-based-on-a ll sliding-fee-scale,-if-established-by amounts with the approval l2 of the board.

13 <u>c. Perform periodic, random reviews of enrollee</u>
14 <u>applications to ensure compliance with program eligibility and</u>

15 <u>enrollment policies.</u> Quality assurance reports shall be made
16 to the board and the department based upon the data maintained

17 by the administrative contractor.

18 e_{τ} <u>d</u>. Perform other duties as determined by the department 19 with the approval of the board.

20 Sec. 2. Section 514I.5, subsection 7, paragraphs d and e, 21 Code 2001, are amended to read as follows:

d. Develop, with the assistance of the department, an
outreach plan, and provide for periodic assessment of the
effectiveness of the outreach plan. The plan shall provide
outreach to families of children likely to be eligible for
assistance under the program, to inform them of the
availability of and to assist the families in enrolling
children in the program. The outreach efforts may include,
but are not limited to, a-comprehensive-statewide-media
campaign, solicitation of cooperation from programs, agencies,
and other persons who are likely to have contact with eligible
children, including but not limited to those associated with
the educational system, and the development of community plans
for outreach and marketing.

35 e. In consultation with the clinical advisory committee,

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1 select-a-single;-nationally-recognized develop a functional 2 health assessment form for an initial assessment of all 3 eligible children participating in the program, establish a 4 baseline for comparison purposes, and develop appropriate 5 indicators to measure the health status of eligible children 6 participating in the program.

7 Sec. 3. Section 514I.5, subsection 7, paragraph i, Code 8 2001, is amended by striking the paragraph.

9 Sec. 4. Section 514I.5, subsection 7, paragraph 1, 10 unnumbered paragraph 1, Code 2001, is amended to read as 11 follows:

Establish an advisory committee to make recommendations to the board and to the general assembly on-or-before by January 14 1, ±9997 annually concerning the provision of health insurance to children with special health care needs under the forogram. The committee shall include individuals with recommendations shall address, but are not limited to, all of the following:

20 Sec. 5. Section 514I.5, subsection 8, paragraphs h and m, 21 Code 2001, are amended to read as follows:

h. The amount of any cost sharing under the program which
shall be assessed on-a-sliding-fee-scale based on family
income, which provides for a minimum amount of cost sharing,
and which complies with federal law.

26 m. The reasons allowed for approval of an application in 27 cases in which prior employer-sponsored coverage ended less 28 than six months prior to the determination of eligibility for 29 the HAWK-I program. The reasons established by rule shall 30 include, but are not limited to, all of the following:

31 (1) Loss of employment due-to-factors-other-than-voluntary 32 termination.

33 (2)--Beath-of-a-parent:

34 (3)--Change-in-employment-to-a-new-employer-that-does-not 35 provide-an-option-for-dependent-coverage-

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S.F. H.F.

1 (4) (2) Change of address so that no employer-sponsored
2 coverage is available.

3 (5) (3) Discontinuation of health benefits to all 4 employees of the applicant's employer.

5 (6) (4) Expiration of the coverage periods established by 6 the federal Consolidated Omnibus Budget Reconciliation Act of 7 1986, Pub. L. No. 99-272, as amended.

8 (7) (5) Self-employment.

9 (8)--Termination-of-health-benefits-due-to-a-long-term 10 disability-

11 (9) (6) Termination of dependent coverage due to an
12 extreme economic hardship on the part of either the employee
13 or-the-employer, as determined by rule.

14 (10)--Substantial-reduction-in-either-lifetime-medical 15 benefits-or-benefit-category-available-to-an-employee-and 16 dependents-under-an-employer's-health-care-plan.

17 If the board determines that the allowance of the six-month 18 period from the time of dropping coverage to be eligible for 19 participation in the HAWK-I program is insufficient to 20 effectively deter applicants or employers of applicants from 21 discontinuing employer-sponsored dependent care coverage for 22 the purpose of participation in the HAWK-I program, the board 23 may adopt rules to extend the time period to a period not to 24 exceed twelve months.

25 Sec. 6. Section 514I.6, subsection 3, Code 2001, is 26 amended by striking the subsection.

27 Sec. 7. Section 514I.7, subsection 2, paragraph c, Code 28 2001, is amended to read as follows:

29 c. Forward names of children who appear to be eligible for 30 medical assistance or-other-public-health-insurance-coverage 31 to-local to the department of human services offices-or-other 32 appropriate-person-or-agency for follow-up follow-up and 33 retain the identifying data on children who are referred. 34 Sec. 8. Section 5141.7, subsection 2, paragraph h, Code

34 Sec. 8. Section 514I.7, subsection 2, paragraph h, Code 35 2001, is amended by striking the paragraph.

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Sec. 9. Section 514I.8, subsection 2, paragraph e, Code
2 2001, is amended to read as follows:

e. Is not currently covered under or was not covered
within the prior six months under a group health plan as
defined in 42 U.S.C. § 300gg-91(a)(1) or other-health-benefit
plan,-unless-the-coverage-was-involuntarily-lost-or unless
dropping-the-coverage-is allowed by rule of the board.

8 Sec. 10. Section 514I.10, Code 2001, is amended to read as
9 follows:

10 514I.10 COST SHARING.

11 1. Cost sharing for eligible children whose family income 12 is at-or below one hundred fifty percent of the federal 13 poverty level shall not exceed the standards permitted under 14 42 U.S.C. § 1396(0)(a)(3) or § 1396(0)(b)(1).

15 2. Cost sharing for eligible children whose family income 16 is-between equals or exceeds one hundred fifty percent and-two 17 hundred-percent of the federal poverty level shall include a 18 premium or copayment amount which is at least a minimum amount 19 but which does not exceed five percent of the annual family 20 income. The amount of the premium or the copayment amount 21 shall be based on family income and size.

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EXPLANATION

This bill amends portions of the Code relating to the healthy and well kids in Iowa (HAWK-I) program.

The bill deletes the requirement that the department of human services (DHS) establish family cost sharing based on a r sliding fee scale. The new language reflects current practice which is establishment of a cost sharing amount approved by the HAWK-I board. The bill also directs DHS to perform periodic, random reviews of enrollee applications to ensure program compliance. Quality assurance reports are to be made to the board and to DHS based upon the data maintained by the administrative contractor of the program.

The bill eliminates the requirement that the outreach s efforts developed by the board include a comprehensive

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1 statewide media campaign. The bill directs the board to 2 develop a functional health assessment form rather than 3 selecting a single, nationally recognized assessment form for 4 children participating in the program. The bill eliminates 5 the requirement that the board perform periodic random reviews 6 of enrollee applications to assure program compliance, as this 7 function is given to the department under the bill. The bill 8 also directs the advisory committee on children with special 9 health care needs to make recommendations, annually, by 10 January 1, rather than only one time by January 1, 1999. 11 The bill eliminates, as reasons allowed for approval of an 12 application in cases in which prior employer-sponsored 13 coverage ended less than six months prior to determination of 14 eligibility for the program, the death of a parent, change in 15 employment to a new employer that does not provide an option 16 for dependent care coverage, termination of health benefits 17 due to a long-term disability, and a substantial reduction in 18 either lifetime medical benefits or benefit category available 19 to an employee and dependents under an employer's health care 20 plan. An existing reason for approval under these 21 circumstances, loss of employment due to factors other than 22 voluntary termination, is amended to provide that any loss of 23 employment is reason for the approval. Another existing 24 reason for approval of an application under these 25 circumstances is amended so that termination of dependent 26 coverage due to an extreme economic hardship on the part of 27 only the employee, and not on the part of either the employee 28 or employer, is reason to allow approval of an application. 29 The bill also eliminates a requirement that participating 30 insurers submit a marketing plan to the HAWK-I board 31 consistent with the board's outreach plan, for approval by the 32 board.

33 The bill amends the directive to the administrative 34 contractor to forward names of children who appear to be 35 eligible for health insurance coverage, other than medical

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1 assistance, to local offices of DHS or other appropriate 2 persons, and limits the directive to forwarding the names of 3 children who appear to be eligible for medical assistance only 4 to the state offices of DHS. The bill also eliminates the 5 directive to the administrative contractor to make program 6 applications available through the mail and through local 7 sites, as determined by DHS, including to schools, local 8 health departments, local department of human services 9 offices, and other locations.

10 The bill also provides for cost sharing based upon the 11 family income percentage which is either below 150 percent of 12 the federal poverty level or which equals or exceeds 150 13 percent of the federal poverty level.

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THOMAS J. VILSACK, GOVERNOR SALLY J. PEDERSON, LT. GOVERNOR DEPARTMENT OF HUMAN SERVICES JESSIE K. RASMUSSEN, DIRECTOR

DATE: January 3, 2001

TO: Members of the General Assembly

FROM: Karla Fultz-McHenry Laul Jul Huder

The Iowa Department of Human Services (DHS) is proposing legislation relating to the HAWK-I program.

The proposed bill:

- Deletes the requirement that DHS establish cost sharing on a sliding fee schedule. The new language reflects current practice which is establishment of cost sharing as approved by the HAWK-I Board.
- Directs DHS to perform periodic, random reviews of enrollee applications to ensure program compliance. Currently this is identified as a function of the Board.
- Eliminates the requirement that outreach efforts include a statewide media campaign.
- Directs the Board to develop a functional health assessment form rather than selecting a single, nationally recognized assessment form for children participating in the program.
- Directs the committee on children with special health care needs to make recommendations annually by January 1, rather than only one time by January 1, 1999.
- Eliminates as reasons allowed for approval of an application in cases in which employersponsored coverage ended less than six months prior to determination of eligibility for the program, the loss of employment for other than voluntary termination, the death of a parent, termination of health benefits due to a long-term disability, and a substantial reduction in either lifetime medical benefits or benefit category available to an employee and dependents under an employer's health care plan. The language is also amended to include that the waiting period does not apply when coverage was dropped due to extreme economic hardship on the part of the employee.
- Eliminates the requirement that participating insurers submit a marketing plan to the HAWK-I Board.
- Eliminates the directive that the administrative contractor forward the names of children who appear eligible for health insurance coverage, other than Medicaid, to local office of DHS or other appropriate persons.
- Eliminates the directive for the administrative contractor to make applications available through the mail and to local sites, as determined by DHS, including schools, local health departments, etc.

5-4/4/01 Commune 5-4/5/61 Do Business CALENDAR

HF 382

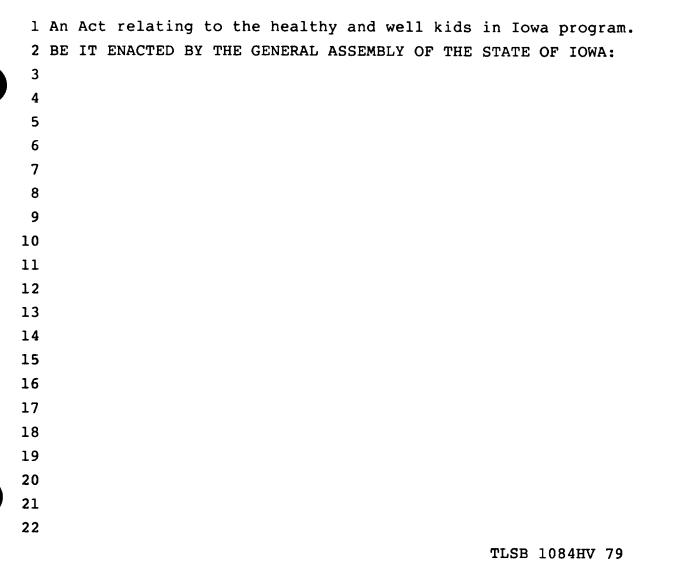
HOUSE FILE 382

BY COMMITTEE ON COMMERCE AND REGULATION

(SUCCESSOR TO HSB 49)

Passed House, Date <u>4/4/01</u> Passed Senate, Date _____ Vote: Ayes <u>98</u> Nays <u>O</u> Vote: Ayes ____ Nays _____

A BILL FOR



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FEB 2 3 2001

Place On Calendar

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Section 1. Section 514I.4, subsection 4, Code 2001, is
amended to read as follows:

3 4. The department shall do or shall provide for all of the 4 following:

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b. Establish the family cost sharing amount;-based-on-a
11 sliding-fee-scale;-if-established-by amounts with the approval
12 of the board.

13 <u>c. Perform periodic, random reviews of enrollee</u>
14 <u>applications to ensure compliance with program eligibility and</u>
15 <u>enrollment policies. Quality assurance reports shall be made</u>
16 <u>to the board and the department based upon the data maintained</u>

17 by the administrative contractor.

18 e_{τ} <u>d</u>. Perform other duties as determined by the department 19 with the approval of the board.

20 Sec. 2. Section 514I.5, subsection 7, paragraphs d and e, 21 Code 2001, are amended to read as follows:

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assistance under the program, to inform them of the
availability of and to assist the families in enrolling
children in the program. The outreach efforts may include,
but are not limited to, a-comprehensive-statewide-media
campaign, solicitation of cooperation from programs, agencies,
and other persons who are likely to have contact with eligible
children, including but not limited to those associated with
the educational system, and the development of community plans
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31 (1) Loss of employment due-to-factors-other-than-voluntary 32 termination.

33 (2)--Beath-of-a-parent:

34 (3)--Change-in-employment-to-a-new-employer-that-does-not 35 provide-an-option-for-dependent-coverages.f. H.f. 382

1 (4) (2) Change of address so that no employer-sponsored.
2 coverage is available.

3 (5) (3) Discontinuation of health benefits to all 4 employees of the applicant's employer.

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12 extreme economic hardship on the part of either the employee
13 or-the-employer, as determined by rule.

14 (10)--Substantial-reduction-in-either-lifetime-medical 15 benefits-or-benefit-category-available-to-an-employee-and 16 dependents-under-an-employer's-health-care-plan-

17 If the board determines that the allowance of the six-month 18 period from the time of dropping coverage to be eligible for 19 participation in the HAWK-I program is insufficient to 20 effectively deter applicants or employers of applicants from 21 discontinuing employer-sponsored dependent care coverage for 22 the purpose of participation in the HAWK-I program, the board 23 may adopt rules to extend the time period to a period not to 24 exceed twelve months.

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27 Sec. 7. Section 514I.7, subsection 2, paragraph c, Code 28 2001, is amended to read as follows:

c. Forward names of children who appear to be eligible for medical assistance or-other-public-health-insurance-coverage ito-local to the department of human services offices-or-other appropriate-person-or-agency for follow-up follow-up and retain the identifying data on children who are referred. Sec. 8. Section 514I.7, subsection 2, paragraph h, Code Socol, is amended by striking the paragraph.

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s.f. H.f. 382

1 Sec. 9. Section 514I.8, subsection 2, paragraph e, Code
2 2001, is amended to read as follows:

3 e. Is not currently covered under or was not covered 4 within the prior six months under a group health plan as 5 defined in 42 U.S.C. § 300gg-91(a)(1) or other-health-benefit 6 plan7-unless-the-coverage-was-involuntarily-lost-or unless 7 dropping-the-coverage-is allowed by rule of the board.

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10 514I.10 COST SHARING.

11 1. Cost sharing for eligible children whose family income 12 is at-or below one hundred fifty percent of the federal 13 poverty level shall not exceed the standards permitted under 14 42 U.S.C. § 1396(0)(a)(3) or § 1396(0)(b)(1).

15 2. Cost sharing for eligible children whose family income 16 is-between equals or exceeds one hundred fifty percent and-two 17 hundred-percent of the federal poverty level shall include a 18 premium or copayment amount which is at least a minimum amount 19 but which does not exceed five percent of the annual family 20 income. The amount of the premium or the copayment amount 21 shall be based on family income and size.

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EXPLANATION

23 This bill amends portions of the Code relating to the 24 healthy and well kids in Iowa (HAWK-I) program.

The bill deletes the requirement that the department of human services (DHS) establish family cost sharing based on a r sliding fee scale. The new language reflects current practice which is establishment of a cost sharing amount approved by the HAWK-I board. The bill also directs DHS to perform periodic, random reviews of enrollee applications to ensure program compliance. Quality assurance reports are to be made to the board and to DHS based upon the data maintained by the administrative contractor of the program.

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1 statewide media campaign. The bill directs the board to 2 develop a functional health assessment form rather than 3 selecting a single, nationally recognized assessment form for 4 children participating in the program. The bill eliminates 5 the requirement that the board perform periodic random reviews 6 of enrollee applications to assure program compliance, as this 7 function is given to the department under the bill. The bill 8 also directs the advisory committee on children with special 9 health care needs to make recommendations, annually, by 10 January 1, rather than only one time by January 1, 1999. 11 The bill eliminates, as reasons allowed for approval of an 12 application in cases in which prior employer-sponsored 13 coverage ended less than six months prior to determination of 14 eligibility for the program, the death of a parent, change in 15 employment to a new employer that does not provide an option 16 for dependent care coverage, termination of health benefits 17 due to a long-term disability, and a substantial reduction in 18 either lifetime medical benefits or benefit category available 19 to an employee and dependents under an employer's health care An existing reason for approval under these 20 plan. 21 circumstances, loss of employment due to factors other than 22 voluntary termination, is amended to provide that any loss of 23 employment is reason for the approval. Another existing 24 reason for approval of an application under these 25 circumstances is amended so that termination of dependent 26 coverage due to an extreme economic hardship on the part of 27 only the employee, and not on the part of either the employee 28 or employer, is reason to allow approval of an application. 29 The bill also eliminates a requirement that participating 30 insurers submit a marketing plan to the HAWK-I board 31 consistent with the board's outreach plan, for approval by the 32 board.

33 The bill amends the directive to the administrative 34 contractor to forward names of children who appear to be 35 eligible for health insurance coverage, other than medical

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S.F. _____ H.F. 382

1 assistance, to local offices of DHS or other appropriate 2 persons, and limits the directive to forwarding the names of 3 children who appear to be eligible for medical assistance only 4 to the state offices of DHS. The bill also eliminates the 5 directive to the administrative contractor to make program 6 applications available through the mail and through local 7 sites, as determined by DHS, including to schools, local 8 health departments, local department of human services 9 offices, and other locations.

10 The bill also provides for cost sharing based upon the 11 family income percentage which is either below 150 percent of 12 the federal poverty level or which equals or exceeds 150 13 percent of the federal poverty level.

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Page 5

HOUSE FILE 382

H-1282 Amend House File 382 as follows: 1 2 1. Page 1, by inserting before line 1 the 3 following: 4 "Section 1. Section 249A.3, Code 2001, is amended 5 by adding the following new subsection: NEW SUBSECTION. 4A. The department shall 6 7 establish presumptive eligibility under the medical 8 assistance program for a child who is under nineteen 9 years of age. A determination of presumptive 10 eligibility shall be made only once in a twelve-month 11 period. 12 Sec. 2. NEW SECTION. 280.7A HEALTHY AND WELL 13 KIDS IN IOWA (HAWK-I) INFORMATION. The board of directors of each school district 14 15 shall require the school district to provide healthy 16 and well kids in Iowa program information and 17 application forms to all students at the time of 18 school registration. The application forms shall be 19 provided by the healthy and well kids in Iowa program 20 pursuant to section 514I.7, subsection 2, paragraph 21 "h"." 22 2. Page 1, by striking lines 5 through 9 and 23 inserting the following: "a. Develop a program application form not to 24 25 exceed two pages in length, which is consistent with 26 the rules of the board, which is easy to understand, 27 complete, and concise, and which, to the greatest 28 extent possible, coordinates with the medical 29 assistance program. The program application form 30 shall provide a space in which the applicant may 31 provide the name and contact information of any person 32 who assisted the applicant in applying for the program 33 and may authorize the administrative contractor to 34 notify the person regarding the outcome of the 35 application with the sole purpose of the notification 36 being that the person will continue to assist the 37 applicant in obtaining and retaining health insurance 38 coverage." 39 3. Page 2, by inserting after line 19 the 40 following: 41 "Sec. . Section 514I.5, subsection 8, paragraph 42 e, Code 2001, is amended by adding the following new 43 subparagraph: NEW SUBPARAGRAPH. (15) 44 (a) Care coordination. 45 For the purposes of this subparagraph subdivision, 46 "care coordination" means coordinating the provision 47 of services to children and families to assure that 48 the children receive health care services by promoting 49 the coordination of social supports and medical 50 services across organizations and providers. Care H-1282 -1MARCH 22, 2001

Page 6

H-1282 Page 2 1 coordination may include but is not limited to 2 educating families about the services provided under 3 the family's health insurance coverage plan; assisting 4 families in selecting providers; assisting families 5 with scheduling of health care appointments, 6 transportation to attend health care appointments, and 7 translation during health care appointments; and 8 assisting families in accessing community support 9 services. Dental services including the coverage of 10 (b) 11 partial dentures and dentures, with an annual coverage 12 maximum of one thousand five hundred dollars. Mental health and substance abuse benefits 13 (C)14 including coverage of Axis I diagnoses as specified in 15 the diagnostic and statistical manual of mental 16 disorders; coverage of the full continuum of treatment 17 services; provision of adequate provider panels; use 18 of admission, discharge, continued stay, and placement 19 criteria specific to children and adolescents; and the 20 use of Iowa juvenile placement criteria for substance 21 abuse services. (d) Medically necessary nutrition services 22 23 provided by a licensed dietician based upon a 24 physician referral. 25 Physical and occupational therapy services." (e) Page 3, by inserting after line 35 the 26 4. 27 following: "Sec. . Section 514I.8, subsection 2, paragraph 28 29 c, Code 2001, is amended to read as follows: c. Is a member of a family whose income does not 30 31 exceed two hundred percent of the federal poverty 32 level, as defined in 42 U.S.C. ¤ 9902(2), including 33 any revision required by such section. Determination 34 of an applicant's income shall be made on the basis of 35 the applicant's self-declaration of income." 5. Page 4, by inserting after line 7 the 36 37 following: "Sec. ____. Section 514I.8, subsection 3, Code 38 39 2001, is amended to read as follows: In accordance with the rules adopted by the 40 3. 41 board, a child may shall be determined to be 42 presumptively eligible for the program pending a final 43 eligibility determination. Following final 44 determination of eligibility by the administrative 45 contractor, a child shall be eligible for a twelve-46 month period. At the end of the twelve-month period, 47 the administrative contractor shall conduct a review 48 of the circumstances of the eligible child's family to 49 establish eligibility and cost sharing for the 50 subsequent twelve-month period." -2-H-1282

H-1282

Page

6. By renumbering as necessary. 1

By OSTERHAUS of Jackson

H-1282 FILED MARCH 21, 2001

W/D 4/4/01 (P.1076)

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HOUSE FILE 382

H-1289 1 Amend House File 382 as follows: 2 1. Page 1, by inserting before line 1 the 3 following: "Section 1. NEW SECTION. 4 280.7A HEALTHY AND WELL 5 KIDS IN IOWA (HAWK-I) INFORMATION. The board of directors of each school district 6 7 shall require the school district to provide healthy 8 and well kids in Iowa program information and 9 application forms to all students at the time of 10 school registration. The application forms shall be 11 provided by the healthy and well kids in Iowa program 12 pursuant to section 514I.7, subsection 2, paragraph 13 "h"." 2. Page 1, by striking lines 5 through 9 and 14 15 inserting the following: "a. Develop a program application form not to 16 17 exceed two pages in length, which is consistent with 18 the rules of the board, which is easy to understand, 19 complete, and concise, and which, to the greatest 20 extent possible, coordinates with the medical 21 assistance program. The program application form 22 shall provide a space in which the applicant may 23 provide the name and contact information of any person 24 who assisted the applicant in applying for the program 25 and may authorize the administrative contractor to 26 notify the person regarding the outcome of the

27 application with the sole purpose of the notification 28 being that the person will continue to assist the

29 applicant in obtaining and retaining health insurance

30 coverage."

By OSTERHAUS of Jackson

H-1289 FILED MARCH 21, 2001 W/29 4/4/01 (P. 1076)

Page 7

HOUSE FILE 382

H-1288 1 Amend House File 382 as follows: Page 1, by inserting before line 1 the 2 1. 3 following: 4 "Section 1. Section 249A.3, Code 2001, is amended 5 by adding the following new subsection: The department shall NEW SUBSECTION. 4A. 6 7 establish presumptive eligibility under the medical 8 assistance program for a child who is under nineteen 9 years of age. A determination of presumptive 10 eligibility shall be made only once in a twelve-month 11 period." 2. Page 2, by inserting after line 19 the 12 13 following: 14 "Sec. . Section 514I.5, subsection 8, paragraph 15 e, Code 2001, is amended by adding the following new 16 subparagraph: NEW SUBPARAGRAPH. (15) (a) Care coordination. 17 18 For the purposes of this subparagraph subdivision, 19 "care coordination" means coordinating the provision 20 of services to children and families to assure that 21 the children receive health care services by promoting 22 the coordination of social supports and medical 23 services across organizations and providers. Care 24 coordination may include but is not limited to 25 educating families about the services provided under 26 the family's health insurance coverage plan; assisting 27 families in selecting providers; assisting families 28 with scheduling of health care appointments, 29 transportation to attend health care appointments, and 30 translation during health care appointments; and 31 assisting families in accessing community support 32 services. 33 (b) Dental services including the coverage of 34 partial dentures and dentures, with an annual coverage 35 maximum of one thousand five hundred dollars. Mental health and substance abuse benefits 36 (C) 37 including coverage of Axis I diagnoses as specified in 38 the diagnostic and statistical manual of mental 39 disorders; coverage of the full continuum of treatment 40 services; provision of adequate provider panels; use 41 of admission, discharge, continued stay, and placement 42 criteria specific to children and adolescents; and the 43 use of Iowa juvenile placement criteria for substance 44 abuse services. 45 (d) Medically necessary nutrition services 46 provided by a licensed dietician based upon a 47 physician referral. (e) Physical and occupational therapy services." 48 3. Page 3, by inserting after line 35 the 49 50 following: -1-H-1288

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Page 2 "Sec. ____. Section 514I.8, subsection 2, paragraph 1 2 c, Code 2001, is amended to read as follows: 3 Is a member of a family whose income does not с. 4 exceed two hundred percent of the federal poverty 5 level, as defined in 42 U.S.C. ¤ 9902(2), including 6 any revision required by such section. Determination 7 of an applicant's income shall be made on the basis of 8 the applicant's self-declaration of income." 9 4. Page 4, by inserting after line 7 the 10 **fol**lowing: "Sec. ____. Section 514I.8, subsection 3, Code 11 12 2001, is amended to read as follows: 3. In accordance with the rules adopted by the 13 14 board, a child may shall be determined to be 15 presumptively eligible for the program pending a final 16 eligibility determination. Following final 17 determination of eligibility by the administrative 18 contractor, a child shall be eligible for a twelve-19 month period. At the end of the twelve-month period, 20 the administrative contractor shall conduct a review 21 of the circumstances of the eligible child's family to 22 establish eligibility and cost sharing for the 23 subsequent twelve-month period." 5. By renumbering as necessary. 24 By OSTERHAUS of Jackson H-1288 FILED MARCH 21, 2001 4/4/01 W/Q A. 1076) HOUSE FILE 382 H - 1417Amend House File 382 as follows: 1 1. Page 3, by inserting after line 24, the 2 3 following: . Section 514I.5, subsection 8, Code "Sec. 4 5 2001, is amended by adding the following new 6 paragraph: NEW PARAGRAPH. o. Allowable deductions to be used 7 8 in the computation of family income, including but not 9 limited to a deduction for the costs of child care." 2. By renumbering as necessary. 10 By REYNOLDS of Van Buren H-1417 FILED APRIL 2, 2001 N/N 4/4/01 (P. 1076)