

Senate Study Bill 1100 - Introduced

SENATE/HOUSE FILE _____
BY (PROPOSED DEPARTMENT OF
HUMAN SERVICES BILL)

A BILL FOR

- 1 An Act relating to medical assistance program-related
- 2 provisions.
- 3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. Section 8A.504, subsection 1, paragraph c,
2 subparagraph (1), Code 2011, is amended to read as follows:

3 (1) Any debt, which is assigned to the department of human
4 services, or which is owed to the department of human services
5 for unpaid premiums under section 249A.3, subsection 2,
6 paragraph "a", subparagraph (1), or section 249J.8, subsection
7 1, or which the child support recovery unit is otherwise
8 attempting to collect, or which the foster care recovery unit
9 of the department of human services is attempting to collect
10 on behalf of a child receiving foster care provided by the
11 department of human services.

12 Sec. 2. Section 217.34, Code 2011, is amended to read as
13 follows:

14 **217.34 Debt setoff.**

15 The investigations division of the department of inspections
16 and appeals and the department of human services shall provide
17 assistance to set off against a person's or provider's income
18 tax refund or rebate any debt which has accrued through written
19 contract, nonpayment of premiums pursuant to section 249A.3,
20 subsection 2, paragraph "a", subparagraph (1), or section
21 249J.8, subsection 1, subrogation, departmental recoupment
22 procedures, or court judgment and which is in the form of a
23 liquidated sum due and owing the department of human services.
24 The department of inspections and appeals, with approval of the
25 department of human services, shall adopt rules under chapter
26 17A necessary to assist the department of administrative
27 services in the implementation of the setoff under section
28 8A.504 in regard to money owed to the state for public
29 assistance overpayments or nonpayment of premiums as specified
30 in this section. The department of human services shall adopt
31 rules under chapter 17A necessary to assist the department of
32 administrative services in the implementation of the setoff
33 under section 8A.504, in regard to collections by the child
34 support recovery unit and the foster care recovery unit.

35 Sec. 3. Section 249A.3, subsection 2, paragraph a,

1 subparagraph (1), Code 2011, is amended to read as follows:

2 (1) (a) As allowed under 42 U.S.C.
3 § 1396a(a)(10)(A)(ii)(XIII), individuals with disabilities,
4 who are less than sixty-five years of age, who are members of
5 families whose income is less than two hundred fifty percent of
6 the most recently revised official poverty guidelines published
7 by the United States department of health and human services
8 for the family, who have earned income and who are eligible for
9 medical assistance or additional medical assistance under this
10 section if earnings are disregarded. As allowed by 42 U.S.C.
11 § 1396a(r)(2), unearned income shall also be disregarded in
12 determining whether an individual is eligible for assistance
13 under this subparagraph. For the purposes of determining the
14 amount of an individual's resources under this subparagraph
15 and as allowed by 42 U.S.C. § 1396a(r)(2), a maximum of ten
16 thousand dollars of available resources shall be disregarded,
17 and any additional resources held in a retirement account, in a
18 medical savings account, or in any other account approved under
19 rules adopted by the department shall also be disregarded.

20 (b) Individuals eligible for assistance under this
21 subparagraph, whose individual income exceeds one hundred
22 fifty percent of the official poverty guidelines published
23 by the United States department of health and human services
24 for an individual, shall pay a premium. The amount of the
25 premium shall be based on a sliding fee schedule adopted by
26 rule of the department and shall be based on a percentage of
27 the individual's income. The maximum premium payable by an
28 individual whose income exceeds one hundred fifty percent of
29 the official poverty guidelines shall be commensurate with
30 the cost of state employees' group health insurance in this
31 state. The payment to and acceptance by an automated case
32 management system or the department of the premium required
33 under this subparagraph shall not automatically confer initial
34 or continuing program eligibility on an individual. A premium
35 paid to and accepted by the department's premium payment

1 process that is subsequently determined to be untimely or to
2 have been paid on behalf of an individual ineligible for the
3 program shall be refunded to the remitter in accordance with
4 rules adopted by the department. Any unpaid premium shall be a
5 debt owed the department.

6 Sec. 4. Section 249J.7, subsection 1, paragraph a, Code
7 2011, is amended to read as follows:

8 a. Expansion population members shall only be eligible
9 to receive expansion population services through a provider
10 included in the expansion population provider network. Except
11 as otherwise provided in this chapter, the expansion population
12 provider network shall be limited to a the following:

13 (1) A publicly owned acute care teaching hospital located in
14 a county with a population over three hundred fifty thousand,
15 the.

16 (2) The university of Iowa hospitals and clinics, ~~and a.~~

17 (3) A regional provider network utilizing the federally
18 qualified health centers or federally qualified health center
19 look-alikes in the state, to provide primary care to members
20 as designated by the department in the phase-in plan utilizing
21 criteria specified in paragraph "b".

22 Sec. 5. Section 249J.8, subsection 1, Code 2011, is amended
23 to read as follows:

24 1. a. ~~Each~~ The total monthly premium and other cost-sharing
25 for an expansion population member whose family income exceeds
26 one hundred fifty percent of the federal poverty level as
27 defined by the most recently revised poverty income guidelines
28 published by the United States department of health and human
29 services shall pay a monthly premium not to exceed one-twelfth
30 of five percent of the member's annual family income regardless
31 of the number of expansion population members in the household.
32 The department shall adopt rules to establish a premium
33 schedule in accordance with this subsection that is calculated
34 based on a member's family income for each ten percent
35 increment of the federal poverty level.

1 b. ~~Each~~ An expansion population member whose family income
2 is equal to or less than one hundred fifty percent of the
3 federal poverty level as defined by the most recently revised
4 poverty income guidelines published by the United States
5 department of health and human services shall not be subject to
6 payment of a monthly premium.

7 c. All premiums shall be paid ~~on~~ by the last day of the
8 month of coverage.

9 d. The department shall deduct the amount of any monthly
10 premiums paid by an expansion population member for benefits
11 under the healthy and well kids in Iowa program when computing
12 the amount of monthly premiums owed under this subsection.

13 e. An expansion population member shall respond to the
14 monthly premium notices either through timely payment or a
15 request for a hardship exemption during the entire period of
16 the member's enrollment.

17 f. Regardless of the length of enrollment, the member
18 is subject to payment of the premium for a minimum of four
19 consecutive months. However, an expansion population member
20 who complies with the requirement of payment of the premium
21 for a minimum of four consecutive months during a consecutive
22 twelve-month period of enrollment shall be deemed to have
23 complied with this requirement for the subsequent consecutive
24 twelve-month period of enrollment and shall only be subject to
25 payment of the monthly premium on a month-by-month basis.

26 g. Timely payment of premiums, ~~including any arrearages~~
27 ~~accrued from prior enrollment,~~ is a condition of receiving any
28 expansion population services. An expansion population member
29 who does not provide timely payment within sixty days of the
30 date the premium is due is subject to disenrollment.

31 h. Any unpaid premiums are a debt owed to the department.

32 i. The payment to and acceptance by an automated case
33 management system or the department of the premium required
34 under this subsection shall not automatically confer initial or
35 continuing program eligibility on an individual.

1 j. A premium paid to and accepted by the department's
2 premium payment process that is subsequently determined to
3 be untimely or to have been paid on behalf of an individual
4 ineligible for the program shall be refunded to the remitter in
5 accordance with rules adopted by the department.

6 k. Premiums collected under this subsection shall be
7 deposited in the premiums subaccount of the account for health
8 care transformation created pursuant to section 249J.23.

9 l. An expansion population member shall also pay the same
10 copayments required of other adult recipients of medical
11 assistance.

12

EXPLANATION

13 This bill relates to medical assistance program-related
14 provisions. The bill provides that unpaid premiums under the
15 Medicaid for employed people with disabilities (MEPD) program
16 and the IowaCare program are considered "qualifying debts"
17 subject to debt setoff procedures.

18 The bill amends provisions describing the provider network
19 for the IowaCare program to reflect inclusion of a regional
20 provider network.

21 The bill amends provisions relating to financial
22 participation of IowaCare members to comply with federal
23 requirements for renewal of the IowaCare waiver. Under the
24 bill, IowaCare members with household incomes at or below
25 150 percent of the federal poverty level (FPL) would not be
26 assessed a monthly premium. Those with incomes greater than
27 150 percent of the FPL, regardless of the number of IowaCare
28 members in the household, would be assessed a monthly premium
29 not to exceed one-twelfth of 5 percent of the household's
30 monthly income in accordance with federal requirements. The
31 bill also provides that a member is subject to disenrollment if
32 premiums are not paid within 60 days of the date the premiums
33 are due.