# House File 2589 - Introduced

HOUSE FILE 2589

BY COMMITTEE ON HEALTH AND
HUMAN SERVICES

(SUCCESSOR TO HSB 198)

## A BILL FOR

- 1 An Act relating to Medicaid-related programs and services
- 2 including the work without worry program for employed
- 3 individuals with disabilities and complex rehabilitation
- 4 technology.
- 5 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

- 1 Section 1. WORK WITHOUT WORRY PROGRAM MEDICAID FOR
  2 EMPLOYED INDIVIDUALS WITH DISABILITIES.
- 3 1. The department of health and human services shall submit
- 4 any waiver request or state plan amendment, or combination
- 5 thereof, to the centers for Medicare and Medicaid services of
- 6 the United States department of health and human services as
- 7 necessary to create a work without worry program for employed
- 8 individuals with disabilities in accordance with this section.
- 9 2. The program shall provide Medicaid coverage based on the 10 following criteria:
- 11 a. The individual has a qualifying disability as determined
- 12 by the social security administration or the individual is
- 13 determined by the department of health and human services
- 14 to have a physical or mental impairment or combination of
- 15 impairments that have lasted or are expected to last for
- 16 at least twelve months or result in death. An individual
- 17 shall not be required to receive federal disability benefits
- 18 to participate in the program. An individual who receives
- 19 supplemental security income shall be automatically eligible
- 20 for coverage under the program and shall not be required to
- 21 submit a separate application for the program.
- 22 b. The individual is sixteen to sixty-five years of age.
- 23 c. The individual is employed and has earned income
- 24 from employment including self-employment. The employment
- 25 requirement shall not be limited by the number of hours or
- 26 amount of income, but the individual shall verify employment
- 27 through evidence of pay stubs or a self-employment ledger.
- 28 The program shall allow for continuation of coverage for a
- 29 participating individual for six months following loss of
- 30 employment if there is an intent on the part of the individual
- 31 to return to employment.
- 32 d. The individual is not subject to any resource or asset
- 33 test or limit under the program, with the exception of the
- 34 following:
- 35 (1) Any vehicle owned by the individual that is not

- 1 adapted for the individual, used primarily by or for the
- 2 individual, and used for transporting the individual to medical
- 3 appointments.
- 4 (2) The primary residence owned and occupied by the
- 5 individual if the assessed value of the residence exceeds four
- 6 hundred thousand dollars.
- 7 e. The individual's income is below four hundred fifty
- 8 percent of the federal poverty level. Income is based only on
- 9 the individual's net earned and unearned income as a household
- 10 of one as that income is adjusted by the following deductions
- ll or disregards:
- 12 (1) A twenty dollar general disregard from unearned income
- 13 that is not from employment.
- 14 (2) A disregard of sixty-five dollars plus one-half of the
- 15 individual's earned income from employment.
- 16 (3) A deduction of impairment-related work expenses.
- 17 (4) A deduction of work expenses for the blind.
- 18 f. An individual shall have access to all traditional
- 19 Medicaid services under the Medicaid state plan as well as
- 20 additional long-term services and supports and community-based
- 21 services, including waiver services, for which the individual
- 22 meets any applicable level of care requirements subject to any
- 23 waiting list or availability of openings for the service and
- 24 support.
- 25 g. An individual may be eligible for or receive other health
- 26 care coverage including through an employer, through Medicare,
- 27 or through the medically needy program, the qualified Medicare
- 28 beneficiary program, or the specified low-income Medicare
- 29 beneficiary program. If the individual has such other coverage
- 30 and is subject to payment of copayments or premiums for that
- 31 coverage, notwithstanding the premium requirements under the
- 32 program to the contrary, the individual shall not be subject to
- 33 payment of premiums otherwise applicable under the program.
- 34 h. An individual with income at or above one hundred fifty
- 35 percent of the federal poverty level shall be subject to

- l payment of a premium not to exceed the limits established under
- 2 federal guidelines.
- 3 i. The program shall also provide that any individual
- 4 participating in the Medicaid for employed persons with
- 5 disabilities program when the work without worry program is
- 6 implemented shall be transferred to and enrolled in the work
- 7 without worry program.
- 8 3. The department of health and human services shall
- 9 implement a work without worry public awareness campaign to
- 10 ensure that consumer information and educational resources are
- ll accessible to individuals with disabilities and the public.
- 12 The department shall also provide technical assistance to
- 13 individuals with disabilities in determining if the work
- 14 without worry program is the best option for coverage under
- 15 that individual's particular circumstances and in applying for
- 16 and maintaining participation in the program.
- 17 Sec. 2. MEDICAID REIMBURSEMENT FOR THE REPAIR OF COMPLEX
- 18 REHABILITATION TECHNOLOGY. Under both Medicaid managed care
- 19 and fee-for-service administration of the Medicaid program, the
- 20 department of health and human services shall not require a
- 21 prescription for reimbursement of a provider for the repair of
- 22 complex rehabilitation equipment, if the complex rehabilitation
- 23 technology was previously prescribed and reimbursed under
- 24 the Medicaid program. For the purposes of this section,
- 25 "complex rehabilitation technology" means items classified
- 26 under the Medicare program as durable medical equipment that
- 27 is individually configured for individuals to meet their
- 28 specific and unique medical, physical, and functional needs
- 29 and capacities for basic activities of daily living and
- 30 instrumental activities of daily living identified as medically
- 31 necessary.
- 32 EXPLANATION
- 33 The inclusion of this explanation does not constitute agreement with 34 the explanation's substance by the members of the general assembly.
- 35 This bill relates to programs and services under the

pf/ko

1 Medicaid program. The bill creates the work without worry 2 program for employed individuals with disabilities 16 to 65 3 years of age under the Medicaid program. The bill directs the 4 department of health and human services (HHS) to submit any 5 waiver request or state plan amendment, or combination thereof, 6 to the centers for Medicare and Medicaid services of the United 7 States department of health and human services as necessary to 8 create a work without worry program for employed individuals 9 with disabilities in accordance with the bill. Criteria for 10 coverage under the program include that the individual has ll a qualifying disability and although an individual is not 12 required to receive federal disability benefits to participate 13 in the program, an individual who receives supplemental 14 security income shall be automatically eligible for coverage 15 under the program; the individual is 16 to 65 years of age; the 16 individual is employed and has earned income from employment 17 including self-employment; the individual is not subject to 18 any resource or asset test or limit under the program with the 19 exception of nonadapted vehicles and a primary residence for 20 which the assessed value exceeds \$400,000; the individual's 21 income is below 450 percent of the federal poverty level as 22 adjusted by specified deductions or disregards; the individual 23 has access to all traditional Medicaid services as well as 24 additional long-term services and supports and community-based 25 services subject to waiting lists and availability of openings; 26 the individual may be eligible for or receive other coverage 27 including through an employer, through Medicare, through the 28 medically needy program, the qualified Medicare beneficiary 29 program, or the specified low-income Medicare beneficiary 30 program, and is not subject to otherwise applicable premiums 31 if the individual is subject to copayments or premiums for 32 the other coverage; the individual with income at or above 33 150 percent of the federal poverty level shall be subject to 34 payment of a premium not to exceed the limits established 35 under federal guidelines; and the program shall provide that

- 1 any individual participating in the Medicaid for employed
- 2 persons with disabilities program at the time the work without
- 3 worry program is implemented shall be transferred to and
- 4 enrolled in the work without worry program. The bill also
- 5 requires HHS to implement a work without worry public awareness
- 6 campaign to ensure that consumer information and educational
- 7 resources are accessible to individuals with disabilities and
- 8 the public, and to provide technical assistance to individuals
- 9 with disabilities in determining if the work without worry
- 10 program is the best option for coverage under the individual's
- 11 particular circumstances and in applying for and maintaining
- 12 participation in the program.
- 13 The bill also provides that under both Medicaid managed care
- 14 and fee-for-service administration of the Medicaid program,
- 15 HHS shall not require a prescription for reimbursement of a
- 16 provider for the repair of complex rehabilitation technology,
- 17 if the complex rehabilitation technology was previously
- 18 prescribed and reimbursed under the Medicaid program. The bill
- 19 defines complex rehabilitation technology.