

1-1 By: Turner, et al. (Senate Sponsor - Averitt) H.B. No. 109
1-2 (In the Senate - Received from the House April 10, 2007;
1-3 April 11, 2007, read first time and referred to Committee on
1-4 Finance; May 21, 2007, reported adversely, with favorable
1-5 Committee Substitute by the following vote: Yeas 12, Nays 1;
1-6 May 21, 2007, sent to printer.)

1-7 COMMITTEE SUBSTITUTE FOR H.B. No. 109 By: Averitt

1-8 A BILL TO BE ENTITLED
1-9 AN ACT

1-10 relating to eligibility for and information regarding the child
1-11 health plan program.

1-12 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-13 SECTION 1. Section 62.002(4), Health and Safety Code, is
1-14 amended to read as follows:

1-15 (4) "Net [~~Gross~~] family income" means the [~~total~~]
1-16 amount of income established for a family after reduction for
1-17 offsets for child care expenses, in accordance with standards
1-18 applicable under the Medicaid [~~without consideration of any~~
1-19 ~~reduction for offsets that may be available to the family under any~~
1-20 ~~other~~] program.

1-21 SECTION 2. Subchapter B, Chapter 62, Health and Safety
1-22 Code, is amended by adding Section 62.056 to read as follows:

1-23 Sec. 62.056. COMMUNITY OUTREACH CAMPAIGN; TOLL-FREE
1-24 HOTLINE. (a) The commission shall conduct a community outreach and
1-25 education campaign to provide information relating to the
1-26 availability of health benefits for children under this chapter.
1-27 The commission shall conduct the campaign in a manner that promotes
1-28 enrollment in, and minimizes duplication of effort among, all
1-29 state-administered child health programs.

1-30 (b) The community outreach campaign must include:

1-31 (1) outreach efforts that involve school-based health
1-32 clinics;

1-33 (2) a toll-free telephone number through which
1-34 families may obtain information about health benefits coverage for
1-35 children; and

1-36 (3) information regarding the importance of each
1-37 conservator of a child promptly informing the other conservator of
1-38 the child about the child's health benefits coverage.

1-39 (c) The commission shall contract with community-based
1-40 organizations or coalitions of community-based organizations to
1-41 implement the community outreach campaign and shall also promote
1-42 and encourage voluntary efforts to implement the community outreach
1-43 campaign. The commission shall procure the contracts through a
1-44 process designed by the commission to encourage broad participation
1-45 of organizations, including organizations that target population
1-46 groups with high levels of uninsured children.

1-47 (d) The commission may direct that the Department of State
1-48 Health Services perform all or part of the community outreach
1-49 campaign.

1-50 (e) The commission shall ensure that information provided
1-51 under this section is available in both English and Spanish.

1-52 SECTION 3. Section 62.101, Health and Safety Code, is
1-53 amended by amending Subsection (b) and adding Subsection (b-1) to
1-54 read as follows:

1-55 (b) The commission shall establish income eligibility
1-56 levels consistent with Title XXI, Social Security Act (42 U.S.C.
1-57 Section 1397aa et seq.), as amended, and any other applicable law or
1-58 regulations, and subject to the availability of appropriated money,
1-59 so that a child who is younger than 19 years of age and whose net
1-60 [~~gross~~] family income is at or below 200 percent of the federal
1-61 poverty level is eligible for health benefits coverage under the
1-62 program. In addition, the commission may establish eligibility
1-63 standards regarding the amount and types of allowable assets for a

2-1 family whose net [~~gross~~] family income is above 150 percent of the
 2-2 federal poverty level.

2-3 (b-1) The eligibility standards adopted under Subsection
 2-4 (b) related to allowable assets:

2-5 (1) must allow a family to own at least \$10,000 in
 2-6 allowable assets; and

2-7 (2) may not in calculating the amount of allowable
 2-8 assets under Subdivision (1) consider:

2-9 (A) the value of one vehicle that qualifies for
 2-10 an exemption under commission rule based on its use;

2-11 (B) the value of a second or subsequent vehicle
 2-12 that qualifies for an exemption under commission rule based on its
 2-13 use if:

2-14 (i) the vehicle is worth \$18,000 or less; or

2-15 (ii) the vehicle has been modified to
 2-16 provide transportation for a household member with a disability;

2-17 (C) if no vehicle qualifies for an exemption
 2-18 based on its use under commission rule, the first \$18,000 of value
 2-19 of the highest valued vehicle; or

2-20 (D) the first \$7,500 of value of any vehicle not
 2-21 described by Paragraph (A), (B), or (C).

2-22 SECTION 4. Subchapter C, Chapter 62, Health and Safety
 2-23 Code, is amended by adding Section 62.1011 to read as follows:

2-24 Sec. 62.1011. VERIFICATION OF INCOME. The commission shall
 2-25 continue employing methods of verifying the net income of the
 2-26 individuals considered in the calculation of an applicant's net
 2-27 family income. The commission shall verify income under this
 2-28 section unless the applicant reports a net family income that
 2-29 exceeds the income eligibility level established under Section
 2-30 62.101(b).

2-31 SECTION 5. Section 62.102, Health and Safety Code, is
 2-32 amended to read as follows:

2-33 Sec. 62.102. CONTINUOUS COVERAGE. (a) Subject to a review
 2-34 under Subsection (b), the [The] commission shall provide that an
 2-35 individual who is determined to be eligible for coverage under the
 2-36 child health plan remains eligible for those benefits until the
 2-37 earlier of:

2-38 (1) the end of a period not to exceed 12 months,
 2-39 beginning the first day of the month [~~the six-month period~~]
 2-40 following the date of the eligibility determination; or

2-41 (2) the individual's 19th birthday.

2-42 (b) During the sixth month following the date of initial
 2-43 enrollment or reenrollment of an individual whose family income
 2-44 exceeds 150 percent of the federal poverty level, the commission
 2-45 shall:

2-46 (1) review the individual's family income and may use
 2-47 electronic technology if available and appropriate; and

2-48 (2) continue to provide coverage if the individual's
 2-49 family income remains within the income eligibility limits
 2-50 prescribed by this chapter.

2-51 (c) If, during the review required under Subsection (b), the
 2-52 commission determines that the individual's family income exceeds
 2-53 the income eligibility limits prescribed by this chapter, the
 2-54 commission may not disenroll the individual until:

2-55 (1) the commission has provided the family an
 2-56 opportunity to demonstrate that the family's family income is
 2-57 within the income eligibility limits prescribed by this chapter;
 2-58 and

2-59 (2) the family fails to demonstrate such eligibility.

2-60 (d) The commission shall provide written notice of
 2-61 termination of eligibility to the individual not later than the
 2-62 30th day before the date the individual's eligibility terminates.

2-63 SECTION 6. Sections 62.154(a) and (d), Health and Safety
 2-64 Code, are amended to read as follows:

2-65 (a) To the extent permitted under Title XXI of the Social
 2-66 Security Act (42 U.S.C. Section 1397aa et seq.), as amended, and any
 2-67 other applicable law or regulations, the child health plan must
 2-68 include a waiting period and[. The child health plan] may include
 2-69 copayments and other provisions intended to discourage:

3-1 (1) employers and other persons from electing to
3-2 discontinue offering coverage for children under employee or other
3-3 group health benefit plans; and

3-4 (2) individuals with access to adequate health benefit
3-5 plan coverage, other than coverage under the child health plan,
3-6 from electing not to obtain or to discontinue that coverage for a
3-7 child.

3-8 (d) The waiting period required by Subsection (a) must:

3-9 (1) extend for a period of 90 days after[+
3-10 ~~[(1)]~~ the last date on [first day of the month in]

3-11 which the applicant was covered under a health benefits plan; and
3-12 (2) apply to a child who was covered by a health
3-13 benefits plan at any time during the 90 days before the date of
3-14 application for coverage under the child health plan [is enrolled
3-15 under the child health plan, if the date of enrollment is on or
3-16 before the 15th day of the month; or

3-17 ~~[(2) the first day of the month after which the~~
3-18 ~~applicant is enrolled under the child health plan, if the date of~~
3-19 ~~enrollment is after the 15th day of the month].~~

3-20 SECTION 7. This Act takes effect immediately if it receives
3-21 a vote of two-thirds of all the members elected to each house, as
3-22 provided by Section 39, Article III, Texas Constitution. If this
3-23 Act does not receive the vote necessary for immediate effect, this
3-24 Act takes effect September 1, 2007.

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