By: Hernandez Luna H.B. No. 1468

## A BILL TO BE ENTITLED

1 AN ACT

- 2 relating to the child health plan program.
- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
- 4 SECTION 1. Section 62.002(2), Health and Safety Code, is
- 5 amended to read as follows:
- 6 (2) "Executive commissioner" or "commissioner
- 7 [Commissioner]" means the <u>executive</u> commissioner of <u>the Health</u>
- 8 [health] and Human Services Commission [human services].
- 9 SECTION 2. Section 62.101(b), Health and Safety Code, is
- 10 amended to read as follows:
- 11 (b) The commission shall establish income eligibility
- 12 levels consistent with Title XXI, Social Security Act (42 U.S.C.
- 13 Section 1397aa et seq.), as amended, and any other applicable law or
- 14 regulations, and subject to the availability of appropriated money,
- 15 so that a child who is younger than 19 years of age and whose net
- 16 family income is at or below 300 [200] percent of the federal
- 17 poverty level is eligible for health benefits coverage under the
- 18 program. In addition, the commission may establish eligibility
- 19 standards regarding the amount and types of allowable assets for a
- 20 family whose net family income is above 250 [150] percent of the
- 21 federal poverty level.
- SECTION 3. Sections 62.102(b) and (c), Health and Safety
- 23 Code, are amended to read as follows:
- 24 (b) During the sixth month following the date of initial

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- 1 enrollment or reenrollment of an individual whose net family income
- 2 exceeds 285 [185] percent of the federal poverty level, the
- 3 commission shall:
- 4 (1) review the individual's net family income and may
- 5 use electronic technology if available and appropriate; and
- 6 (2) continue to provide coverage if the individual's
- 7 net family income does not exceed the income eligibility limits
- 8 prescribed by <u>Section 62.101</u> [this chapter].
- 9 (c) If, during the review required under Subsection (b), the
- 10 commission determines that the individual's net family income
- 11 exceeds the income eligibility limits prescribed by <u>Section 62.101</u>
- 12 [this chapter], the commission may not disenroll the individual
- 13 until:
- 14 (1) the commission has provided the family an
- 15 opportunity to demonstrate that the family's net family income is
- 16 within the income eligibility limits prescribed by <u>Section 62.101</u>
- 17 [this chapter]; and
- 18 (2) the family fails to demonstrate such eligibility.
- 19 SECTION 4. Section 62.153, Health and Safety Code, is
- 20 amended by amending Subsections (a) and (c) and adding Subsections
- 21 (a-1) and (a-2) to read as follows:
- 22 (a) To the extent permitted under 42 U.S.C. Section 1397cc,
- 23 as amended, and any other applicable law or regulations, the
- 24 commission shall require enrollees whose net family incomes are at
- 25 or below 200 percent of the federal poverty level to share the cost
- 26 of the child health plan, including provisions requiring enrollees
- 27 under the child health plan to pay:

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- 1 (1) a copayment for services provided under the plan;
- 2 (2) an enrollment fee; or
- 3 (3) a portion of the plan premium.
- 4 <u>(a-1) The commission shall require enrollees whose net</u>
  5 <u>family incomes are greater than 200 percent but not greater than 300</u>
  6 percent of the federal poverty level to pay a share of the cost of
- 7 the child health plan through copayments, fees, and a portion of the
- 8 plan premium. The amount of the share required to be paid must:
- 9 (1) exceed the amount required to be paid by enrollees
- 10 described by Subsection (a), but the total amount required to be
- 11 paid may not exceed five percent of an enrollee's net family income;
- 12 and
- (2) increase incrementally, as determined by the
- 14 commission, as an enrollee's net family income increases.
- 15 <u>(a-2)</u> In establishing the cost required to be paid by an
- 16 enrollee described by Subsection (a-1) as a portion of the plan
- 17 premium, the commission shall ensure that the cost progressively
- 18 increases as the number of children in the enrollee's family
- 19 provided coverage increases.
- 20 (c) The [If cost-sharing provisions imposed under
- 21 Subsection (a) include requirements that enrollees pay a portion of
- 22 the plan premium, the] commission shall specify the manner of
- 23 payment for any portion of the plan premium required to be paid by
- 24 an enrollee under this section [in which the premium is paid]. The
- 25 commission may require that the premium be paid to the [Texas
- 26 Department of Health and Human Services Commission, the [Texas]
- 27 Department of State Health [Human] Services, or the health plan

- 1 provider. The commission shall develop an option for an enrollee to
- 2 pay monthly premiums using direct debits to bank accounts or credit
- 3 cards.
- 4 SECTION 5. Chapter 62, Health and Safety Code, is amended by
- 5 adding Subchapter F to read as follows:
- 6 SUBCHAPTER F. BUY-IN OPTION
- 7 Sec. 62.251. BUY-IN OPTION FOR CERTAIN CHILDREN. The
- 8 executive commissioner shall develop and implement a buy-in option
- 9 in accordance with this subchapter under which children whose net
- 10 <u>family incomes exceed 300 percent of the federal poverty level are</u>
- 11 eligible to purchase health benefits coverage available under the
- 12 child health plan program.
- Sec. 62.252. RULES; ELIGIBILITY AND COST-SHARING. (a) The
- 14 executive commissioner shall adopt rules in accordance with federal
- 15 law that apply to a child for whom health benefits coverage is
- 16 purchased under this subchapter. The rules must:
- 17 (1) establish eligibility requirements;
- 18 (2) ensure that premiums:
- 19 (A) are based on the average cost per child of all
- 20 children enrolled in the child health plan program; and
- 21 <u>(B) progressively increase as the number of</u>
- 22 children in the enrollee's family provided coverage increases;
- 23 (3) require payment of 100 percent of health benefits
- 24 plan premiums, fees to offset administrative costs incurred under
- 25 this subchapter, and additional deductibles, coinsurance, or other
- 26 cost-sharing payments as determined by the executive commissioner;
- 27 (4) provide for a waiting period as determined by the

- 1 <u>executive commissioner; and</u>
- 2 (5) include an option for an enrollee to pay monthly
- 3 premiums using direct debits to bank accounts or credit cards.
- 4 (b) Notwithstanding any other provision of this chapter,
- 5 the executive commissioner may establish rules and procedures for
- 6 children for whom health benefits coverage is purchased under this
- 7 subchapter that differ from the rules and procedures generally
- 8 applicable to the child health plan program.
- 9 Sec. 62.253. CROWD-OUT. To the extent allowed by federal
- 10 law, the buy-in option developed under this subchapter must include
- 11 provisions designed to discourage:
- 12 (1) employers and other persons from electing to
- 13 discontinue offering health benefits plan coverage for employees'
- 14 children under employee or other group health benefits plans; and
- 15 (2) individuals with access to adequate health
- 16 benefits plan coverage for their children from electing not to
- 17 obtain, or to discontinue, that coverage.
- 18 SECTION 6. Not later than January 1, 2012, the executive
- 19 commissioner of the Health and Human Services Commission shall
- 20 adopt rules as necessary to implement Subchapter F, Chapter 62,
- 21 Health and Safety Code, as added by this Act.
- 22 SECTION 7. If before implementing any provision of this Act
- 23 a state agency determines that a waiver or authorization from a
- 24 federal agency is necessary for implementation of that provision,
- 25 the agency affected by the provision shall request the waiver or
- 26 authorization and may delay implementing that provision until the
- 27 waiver or authorization is granted.

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1 SECTION 8. This Act takes effect September 1, 2011.