By:  Bernal H.B. No. 108

A BILL TO BE ENTITLED

AN ACT

relating to the creation of a Medicaid buy-in program for certain low-income individuals through the expansion of Medicaid under the federal Patient Protection and Affordable Care Act.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

Section 1.  Chapter 32, Human Resources Code, is amended by adding Subchapter H to read as follows:

SUBCHAPTER H. EXPANSION OF ELIGIBILITY FOR MEDICAL ASSISTANCE

Sec. 32.351.  EXPANDED ELIGIBILITY FOR MEDICAL ASSISTANCE UNDER PATIENT PROTECTION AND AFFORDABLE CARE ACT. (a) Notwithstanding any other law, the commission shall provide medical assistance to all persons who apply for that assistance and for whom federal matching funds are available under the Patient Protection and Affordable Care Act (Pub. L. No. 111-148), as amended by the Health Care and Education Reconciliation Act of 2010 (Pub. L. No. 111-152), to provide that assistance.

(b)  The executive commissioner shall adopt rules regarding the provision of medical assistance as required by this section.

Sec. 32.352.  ANNUAL REPORT ON EXPANDED ELIGIBILITY FOR MEDICAL ASSISTANCE. Not later than December 1 of each year, the commission shall report to the governor, the lieutenant governor, the speaker of the house of representatives, and the standing committees of the senate and the house of representatives having primary jurisdiction over the medical assistance program on the effects of expanding eligibility for medical assistance under Section 32.351, including the effects on:

(1)  the number of persons in this state who do not have health benefits coverage;

(2)  state health care costs, including costs relating to programs funded with money appropriated out of the general revenue fund;

(3)  local health care costs; and

(4)  charity care and uncompensated care costs for hospitals.

SECTION 2.  Subtitle I, Title 4, Government Code, is amended by adding Chapter 540 to read as follows:

CHAPTER 540. PROGRAM TO ENSURE HEALTH BENEFIT PLAN COVERAGE FOR CERTAIN CHILDREN THROUGH A MEDICAID BUY-IN PROGRAM

Sec. 540.0001.  PROGRAM FOR HEALTH BENEFIT PLAN COVERAGE FOR CHILDREN THROUGH A MEDICAID BUY-IN PROGRAM. The commission in consultation with the commissioner of insurance shall develop and implement a program that allows certain individuals to purchase health benefit plan coverage from a managed care organization enrolled in the state Medicaid program.

Sec. 540.0002.  ENROLLMENT ELIGIBILITY. (a) A child is eligible to enroll in a program designed and established under this chapter if the child:

(1)  is younger than 19 years of age; and

(2)  does not have health benefit coverage under a health benefit plan because the child's family does not have access to or cannot afford a plan through the private marketplace, including:

(A)  an employer-sponsored health benefit plan; or

(B)  a health benefit plan for which an enrollee receives a premium subsidy under the Patient Protection and Affordable Care Act (Pub. L. No. 111-148) due to the amount of family income.

Sec. 540.0003.  MINIMUM PROGRAM REQUIREMENTS. A program designed and established under this chapter must:

(1)  provide children whose family's income is at or below 200% of the federal poverty level the ability to buy into the state Medicaid program; and

(2)  create a sliding-scale premium for families whose income is between 133% and 200% of the federal poverty level.

Sec. 540.0004.  RULES. The executive commissioner may adopt rules necessary to implement this chapter.

SECTION 3.  Section 32.351, Human Resources Code, as added by this Act, applies only to an initial determination or recertification of eligibility of a person for medical assistance under Chapter 32, Human Resources Code, made on or after the date the section is implemented, regardless of the date the person applied for that assistance.

SECTION 4.  As soon as possible after the effective date of this Act, the executive commissioner of the Health and Human Services Commission shall take all necessary actions to expand eligibility for medical assistance under Chapter 32, Human Resources Code, in accordance with Section 32.351, Human Resources Code, as added by this Act, including notifying appropriate federal agencies of that expanded eligibility. If before implementing any provision of this Act a state agency determines that any other waiver or authorization from a federal agency is necessary for implementation of that provision, the agency affected by the provision shall request the waiver or authorization and may delay implementing that provision until the waiver or authorization is granted.

SECTION 5.  As soon as practicable after the effective date of this Act, the executive commissioner of the Health and Human Services Commission shall develop and implement the program required by Chapter 540, Government Code, as added by this Act.

SECTION 6.  If before implementing any provision of this Act a state agency determines that a waiver or authorization from a federal agency is necessary for implementation of that provision, the agency affected by the provision shall request the waiver or authorization and may delay implementing that provision until the waiver or authorization is granted.

SECTION 7.  This Act takes effect on the 91st day after the last day of the legislative session.