

**DRAFT ONLY
NOT APPROVED FOR
INTRODUCTION**

HOUSE BILL NO. [Bill Number]

Medicaid expansion-share plan.

Sponsored by: Representative(s) HDraft

A BILL

for

1 AN ACT relating to Medicaid; providing for expansion of
2 coverage to low income persons as specified; authorizing a
3 Medicaid demonstration waiver and state plan amendment;
4 providing waiver and plan amendment requirements as
5 specified; providing an appropriation; and providing for an
6 effective date.

7

8 *Be It Enacted by the Legislature of the State of Wyoming:*

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10 **Section 1.** W.S. 42-4-401 through 42-4-406 are created

11 to read:

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ARTICLE 4

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MEDICAID EXPANSION

42-4-401. Definitions.

(a) As used in this article:

(i) "Alternative benefits plan" means a package of health care benefits, defined in the demonstration waiver documents or state plan amendment authorized in this article, and afforded to individual participants pursuant to this article. The alternative benefits plan shall include:

(A) Essential health benefits required under section 1302(b) of the Patient Protection and Affordable Care Act, P.L. 111-148;

(B) Benefits benchmarked to, actuarially equivalent to or otherwise similar to a commercial private insurance plan to the extent authorized by section

1 1937(b)(1) or 1937(b)(2) of the Social Security Act, 42
2 U.S.C. 1396u-7(b);

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4 (C) Nonemergency transportation, family
5 planning services and access to essential community health
6 providers to the extent authorized by rules and regulations
7 of the department;

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9 (D) For medically frail individuals and
10 other populations deemed necessary by federal regulations,
11 medical assistance as provided to qualified recipients
12 under article 1 of this chapter.

13

14 (ii) "Demonstration waiver" or "waiver" means a
15 negotiated demonstration waiver under section 1115 of the
16 Social Security Act, 42 U.S.C. 1315;

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18 (iii) "Program" means Medicaid coverage for
19 certain individuals authorized by W.S. 42-4-403 and
20 42-4-404.

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22 **42-4-402. Temporary Medicaid expansion.**

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2 Commencing as soon as practicable after July 1, 2015, the
3 department shall provide for all persons described under
4 section 1902(a)(10)(A)(i)(VIII) of the Social Security Act,
5 42 U.S.C. 1396a(a)(10)(A)(i)(VIII), to be eligible for
6 services under this chapter, to the extent authorized by
7 this article.

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9 **42-4-403. Medicaid expansion; demonstration project**
10 **for higher income individuals.**

11

12 (a) The director of the department and the governor
13 shall negotiate with the centers for Medicare and Medicaid
14 services of the United States department of health and
15 human services for a demonstration waiver to provide
16 Medicaid coverage as provided in this section, as soon as
17 practicable after July 1, 2015, for individuals who are
18 described under section 1902(a)(10)(A)(i)(VIII) of the
19 Social Security Act, 42 U.S.C. 1396a(a)(10)(A)(i)(VIII),
20 and who meet the eligibility and participation requirements
21 of this section.

22

1 (b) Any Medicaid coverage pursuant to this section
2 shall be subject to the following:

3

4 (i) Coverage shall be pursuant to a negotiated
5 demonstration waiver under section 1115 of the Social
6 Security Act, 42 U.S.C. 1315;

7

8 (ii) Individuals with modified adjusted gross
9 income above one hundred percent (100%) and up to one
10 hundred thirty-three percent (133%) of the federal poverty
11 level, as defined in 42 U.S.C. 1396a(e)(14)(I)(i), and who
12 are not medically frail or otherwise precluded by federal
13 regulation from participation in demonstration waivers,
14 shall be eligible to become participants in the program
15 under this section;

16

17 (iii) Health care services shall be available
18 through the regular Medicaid provider network and
19 administered by the department, but shall include only
20 those services identified in the alternative benefits plan;

21

1 (iv) Participants shall be required to pay a
2 monthly premium based on modified adjusted income and shall
3 be required to make co-payments for covered services in
4 amounts set forth in the alternative benefits plan. Cost
5 sharing, including premiums and co-payments, shall not
6 exceed five percent (5%) of a participant's modified
7 adjusted gross income;

8

9 (v) A participant who fails to pay required
10 premiums for ninety (90) days shall be disenrolled from the
11 program;

12

13 (vi) Participants who within a plan year
14 successfully complete healthy lifestyle challenges
15 specified by the program shall receive a premium discount
16 for the following plan year;

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18 (vii) To the extent authorized by federal law,
19 participants shall be required to complete a comprehensive
20 health assessment upon program enrollment and annually
21 thereafter;

22

1 (viii) The program shall include comprehensive
2 case management and utilization review for individuals with
3 complex healthcare needs;

4

5 (ix) Unemployed participants who are able to
6 work shall be enrolled in an appropriate work assistance
7 benefit at the time of application. The work assistance
8 benefit may include, as appropriate for the individual
9 participant, access to a job search website, resume
10 assistance, services for matching skills to jobs, job
11 training and vocational rehabilitation.

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13 **42-4-404. Medicaid expansion; alternative benefit**
14 **plan for lower income individuals.**

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16 (a) The director of the department shall amend the
17 state Medicaid plan to provide Medicaid coverage as
18 provided in this section as soon as practicable after July
19 1, 2015 for individuals who are described under section
20 1902(a)(10)(A)(i)(VIII) of the Social Security Act, 42
21 U.S.C. 1396a(a)(10)(A)(i)(VIII), and who meet the
22 eligibility and participation requirements of this section.

1

2 (b) Any Medicaid coverage pursuant to this section
3 shall be subject to the following:

4

5 (i) Individuals with income equal to or below
6 one hundred percent (100%) of the federal poverty level,
7 and who are not medically frail or otherwise precluded from
8 alternative benefit plan coverage by federal regulation,
9 shall be eligible to become participants in the program
10 under this section;

11

12 (ii) Health care services shall be available
13 through the regular Medicaid provider network and
14 administered by the department, but shall include only
15 those services identified in the alternative benefits plan;

16

17 (iii) Participants shall not be required to pay
18 a monthly premium but shall be required to make co-payments
19 for covered services in amounts determined by the
20 department and as specified in the state Medicaid plan;

21

1 (iv) To the extent authorized by federal law,
2 participants shall be required to complete a comprehensive
3 health assessment upon program enrollment and annually
4 thereafter;

5

6 (v) The program shall include comprehensive case
7 management and utilization review for individuals with
8 complex health care needs;

9

10 (vi) Unemployed participants who are able to
11 work shall be enrolled in a work assistance benefit at the
12 time of application. The work assistance benefit may
13 include, as appropriate for the individual participant,
14 access to a job search website, resume assistance, services
15 for matching skills to jobs, job training and vocational
16 rehabilitation.

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18 **42-4-405. Medicaid expansion; employer sponsored**
19 **insurance premium assistance.**

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21 Individuals eligible for Medicaid under this article who
22 are employed and who are eligible for an employer sponsored

1 group health plan, the cost of which does not exceed nine
2 and one-half percent (9.5%) of the individual's annual
3 household income, may receive premium assistance as a
4 Medicaid benefit in lieu of benefits under W.S. 42-4-403 or
5 42-4-404.

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7 **42-4-406. Medicaid expansion; federal funding**
8 **contingency.**

9

10 The Medicaid program created by this article shall not be
11 administered during any time period in which the federal
12 medical assistance percentage, as currently provided
13 pursuant to 42 U.S.C. 1396d(y), is less than ninety percent
14 (90%).

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16 **Section 2.** There is appropriated up to (amount) in
17 federal funds to the department of health. This
18 appropriation shall be for the period beginning with the
19 effective date of this act and ending December 31, 2016.
20 This appropriation shall only be expended for the purpose
21 of expanded Medicaid coverage pursuant to 42 U.S.C.
22 1396a(a)(10)(A)(i)(VIII) and W.S. 42-4-401 through

1 42-4-406. Notwithstanding any other provision of law, this
2 appropriation shall not be transferred or expended for any
3 other purpose.

4

5 **Section 3.** This act is effectively immediately upon
6 completion of all acts necessary for a bill to become law
7 as provided by Article 4, Section 8 of the Wyoming
8 Constitution.

9

10

(END)