SECOND REGULAR SESSION

HOUSE COMMITTEE SUBSTITUTE FOR

HOUSE BILL NO. 2354

94TH GENERAL ASSEMBLY

Reported from the Special Committee on Ticket to Work April 17, 2008 with recommendation that House Committee Substitute for House Bill No. 2354 Do Pass. Referred to the Committee on Rules pursuant to Rule 25(21)(f).

D. ADAM CRUMBLISS, Chief Clerk

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AN ACT

To repeal sections 135.535 and 208.146 RSMo, and to enact in lieu thereof three new sections relating to health care benefits and assistance.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Sections 135.535 and 208.146, RSMo, are repealed and three new sections enacted in lieu thereof, to be known as sections 135.535, 208.146, and 208.148, to read as follows:

135.535. A corporation, limited liability corporation, partnership or sole proprietorship, which moves its operations from outside Missouri or outside a distressed 3 community into a distressed community, or which commences operations in a distressed community on or after January 1, 1999, and in either case has more than seventy-five percent of its employees at the facility in the distressed community, and which has fewer than one hundred employees for whom payroll taxes are paid, and which is a manufacturing, biomedical, medical devices, scientific research, animal research, computer software design or development, 8 computer programming, including Internet, web hosting, and other information technology, wireless or wired or other telecommunications or a professional firm shall receive a forty percent credit against income taxes owed pursuant to chapter 143, 147 or 148, RSMo, other than taxes 11 withheld pursuant to sections 143.191 to 143.265, RSMo, for each of the three years after such move, if approved by the department of economic development, which shall issue a certificate 12

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

of eligibility if the department determines that the taxpayer is eligible for such credit. The

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maximum amount of credits per taxpayer set forth in this subsection shall not exceed one 15 hundred twenty-five thousand dollars for each of the three years for which the credit is claimed. 16 The department of economic development, by means of rule or regulation promulgated pursuant 17 to the provisions of chapter 536, RSMo, shall assign appropriate North American Industry Classification System numbers to the companies which are eligible for the tax credits provided 18 19 for in this section. Such three-year credits shall be awarded only one time to any company which 20 moves its operations from outside of Missouri or outside of a distressed community into a distressed community or to a company which commences operations within a distressed 21 22 community. A taxpayer shall file an application for certification of the tax credits for the first 23 year in which credits are claimed and for each of the two succeeding taxable years for which 24 credits are claimed.

- 2. Employees of such facilities physically working and earning wages for that work within a distressed community whose employers have been approved for tax credits pursuant to subsection 1 of this section by the department of economic development for whom payroll taxes are paid shall also be eligible to receive a tax credit against individual income tax, imposed pursuant to chapter 143, RSMo, equal to one and one-half percent of their gross salary paid at such facility earned for each of the three years that the facility receives the tax credit provided by this section, so long as they were qualified employees of such entity. The employer shall calculate the amount of such credit and shall report the amount to the employee and the department of revenue.
- 34 3. A tax credit against income taxes owed pursuant to chapter 143, 147 or 148, RSMo, 35 other than the taxes withheld pursuant to sections 143.191 to 143.265, RSMo, in lieu of the credit against income taxes as provided in subsection 1 of this section, may be taken by such an 36 37 entity in a distressed community in an amount of forty percent of the amount of funds expended 38 for computer equipment and its maintenance, medical laboratories and equipment, research 39 laboratory equipment, manufacturing equipment, fiber optic equipment, high speed 40 telecommunications, wiring or software development expense up to a maximum of seventy-five 41 thousand dollars in tax credits for such equipment or expense per year per entity and for each of 42 three years after commencement in or moving operations into a distressed community. 43 corporation, partnership or sole partnership, which has no more than one hundred employees for 44 whom payroll taxes are paid, which is already located in a distressed community and which 45 expends funds for such equipment pursuant to subsection 3 of this section in an amount 46 exceeding its average of the prior two years for such equipment, shall be eligible to receive a tax 47 credit against income taxes owed pursuant to chapters 143, 147 and 148, RSMo, in an amount 48 equal to the lesser of seventy-five thousand dollars or twenty-five percent of the funds expended 49 for such additional equipment per such entity. Tax credits allowed pursuant to this subsection

or subsection 1 of this section may be carried back to any of the three prior tax years and carried forward to any of the five **subsequent** tax years.

- 5. An existing corporation, partnership or sole proprietorship that is located within a distressed community and that relocates employees from another facility outside of the distressed community to its facility within the distressed community, and an existing business located within a distressed community that hires new employees for that facility may both be eligible for the tax credits allowed by subsections 1 and 3 of this section. To be eligible for such tax credits, such a business, during one of its tax years, shall employ within a distressed community at least twice as many employees as were employed at the beginning of that tax year. A business hiring employees shall have no more than one hundred employees before the addition of the new employees. This subsection shall only apply to a business which is a manufacturing, biomedical, medical devices, scientific research, animal research, computer software design or development, computer programming or telecommunications business, or a professional firm.
- 6. Tax credits shall be approved for applicants meeting the requirements of this section in the order that such applications are received. Certificates of tax credits issued in accordance with this section may be transferred, sold or assigned by notarized endorsement which names the transferree.
- 7. The tax credits allowed pursuant to subsections 1, 2, 3, 4 and 5 of this section shall be for an amount of no more than ten million dollars for each year beginning in 1999. To the extent there are available tax credits remaining under the ten million dollar cap provided in this section, up to one [hundred thousand] million dollars in the remaining credits shall first be used for tax credits authorized under section 135.562. The total maximum credit for all entities already located in distressed communities and claiming credits pursuant to subsection 4 of this section shall be seven hundred and fifty thousand dollars. The department of economic development in approving taxpayers for the credit as provided for in subsection 6 of this section shall use information provided by the department of revenue regarding taxes paid in the previous year, or projected taxes for those entities newly established in the state, as the method of determining when this maximum will be reached and shall maintain a record of the order of approval. Any tax credit not used in the period for which the credit was approved may be carried over until the full credit has been allowed.
- 8. A Missouri employer relocating into a distressed community and having employees covered by a collective bargaining agreement at the facility from which it is relocating shall not be eligible for the credits in subsection 1, 3, 4 or 5 of this section, and its employees shall not be eligible for the credit in subsection 2 of this section if the relocation violates or terminates a collective bargaining agreement covering employees at the facility, unless the affected collective bargaining unit concurs with the move.

- 9. Notwithstanding any provision of law to the contrary, no taxpayer shall earn the tax credits allowed in this section and the tax credits otherwise allowed in section 135.110, or the tax credits, exemptions, and refund otherwise allowed in sections 135.200, 135.220, 135.225 and 135.245, respectively, for the same business for the same tax period.
- 208.146. 1. The program established under this section shall be known as the "Ticket to Work Health Assurance Program". Subject to appropriations and in accordance with the federal Ticket to Work and Work Incentives Improvement Act of 1999 (TWWIIA), Public Law 106-170, the medical assistance provided for in section 208.151 may be paid for a person who is employed and who:
- 6 (1) Except for earnings, meets the definition of disabled under the Supplemental Security
 7 Income Program or meets the definition of an employed individual with a medically improved
 8 disability under TWWIIA;
 - (2) Has earned income, as defined in subsection 2 of this section;
 - (3) Meets the asset limits in subsection 3 of this section;
 - (4) Has net income, as defined in subsection 3 of this section, that does not exceed the limit for permanent and totally disabled individuals to receive nonspenddown MO HealthNet under subdivision (24) of subsection 1 of section 208.151; and
 - (5) Has a gross income of two hundred fifty percent or less of the federal poverty level, excluding any earned income of the worker with a disability between two hundred fifty and three hundred percent of the federal poverty level. For purposes of this subdivision, "gross income" includes all income of the person and the person's spouse that would be considered in determining MO HealthNet eligibility for permanent and totally disabled individuals under subdivision (24) of subsection 1 of section 208.151. Individuals with gross incomes in excess of one hundred percent of the federal poverty level shall pay a premium for participation in accordance with subsection 4 of this section.
 - 2. For income to be considered earned income for purposes of this section, the department of social services shall document that Medicare and Social Security taxes are withheld from such income. Self-employed persons shall provide proof of payment of Medicare and Social Security taxes for income to be considered earned.
 - 3. (1) For purposes of determining eligibility under this section, the available asset limit and the definition of available assets shall be the same as those used to determine MO HealthNet eligibility for permanent and totally disabled individuals under subdivision (24) of subsection 1 of section 208.151 except for:
 - (a) Medical savings accounts limited to deposits of earned income and earnings on such income while a participant in the program created under this section with a value not to exceed five thousand dollars per year; and

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- 33 (b) Independent living accounts limited to deposits of earned income and earnings on 34 such income while a participant in the program created under this section with a value not to 35 exceed five thousand dollars per year. For purposes of this section, an "independent living 36 account" means an account established and maintained to provide savings for transportation, 37 housing, home modification, and personal care services and assistive devices associated with 38 such person's disability.
 - (2) To determine net income, the following shall be disregarded:
 - (a) All earned income of the disabled worker;
- 41 (b) The first sixty-five dollars and one-half of the remaining earned income of a 42 nondisabled spouse's earned income;
 - (c) A twenty dollar standard deduction;
 - (d) Health insurance premiums;
- (e) A seventy-five dollar a month standard deduction for the disabled worker's dental and optical insurance when the total dental and optical insurance premiums are less than seventy-five dollars;
 - (f) All Supplemental Security Income payments, and the first **two hundred** fifty dollars of SSDI payments;
 - (g) A standard deduction for impairment-related employment expenses equal to one-half of the disabled worker's earned income.
 - 4. Any person whose gross income exceeds one hundred percent of the federal poverty level shall pay a premium for participation in the medical assistance provided in this section. Such premium shall be:
 - (1) For a person whose gross income is more than one hundred percent but less than one hundred fifty percent of the federal poverty level, four percent of income at one hundred percent of the federal poverty level;
 - (2) For a person whose gross income equals or exceeds one hundred fifty percent but is less than two hundred percent of the federal poverty level, four percent of income at one hundred fifty percent of the federal poverty level;
 - (3) For a person whose gross income equals or exceeds two hundred percent but less than two hundred fifty percent of the federal poverty level, five percent of income at two hundred percent of the federal poverty level;
 - (4) For a person whose gross income equals or exceeds two hundred fifty percent up to and including three hundred percent of the federal poverty level, six percent of income at two hundred fifty percent of the federal poverty level.
- 5. Recipients of services through this program shall report any change in income or household size within ten days of the occurrence of such change. An increase in premiums

resulting from a reported change in income or household size shall be effective with the next premium invoice that is mailed to a person after due process requirements have been met. A decrease in premiums shall be effective the first day of the month immediately following the month in which the change is reported.

- 6. If an eligible person's employer offers employer-sponsored health insurance and the department of social services determines that it is more cost effective, such person shall participate in the employer-sponsored insurance. The department shall pay such person's portion of the premiums, co-payments, and any other costs associated with participation in the employer-sponsored health insurance.
 - 7. The provisions of this section shall expire six years after August 28, 2007.
- 208.148. 1. As used in this section, "MO HealthNet" means the program described in section 208.001.
- 2. Under the MO HealthNet program, any physician who is a provider in the program and meets the requirements of this section shall receive enhanced reimbursement for the specified services provided, subject to appropriations. In order to qualify for the enhanced reimbursement, the physician provider shall:
 - (1) Become the health care home for a MO HealthNet patient;
- (2) Complete a patient history and consultation, including but not limited to a review of systems, a list of problems, and the initiation of coordination of care for the MO HealthNet patient; and
- (3) File a treatment plan for the MO HealthNet patient. Such plan may be filed electronically.
- 3. If a physician provider meets the requirements of subsection 2 of this section, the physician provider shall be reimbursed under the program at the following rates for all services provided by the physician with the American Medical Association Current Procedural Terminology (CPT) codes 99201 to 99205 for new patients and CPT codes 99211 to 99215 for established patients:
- (1) For new patients, one hundred percent of the Medicare reimbursement rate for such services; and
- (2) For established patients, one hundred percent of the Medicare reimbursement rate for such services.
- 4. (1) For purposes of this section, the MO HealthNet division, any third-party administrator, or any other entity that contracts with the division for health care services shall not change any diagnostic or current procedural terminology code submitted by the health care provider for health care services without the express written permission of the health care provider and without the examination of the patient record.

- (2) Every contract between the division or any agent of the division and a health care provider shall specifically set forth the codes, including code modifiers, for which the division shall provide compensation, remuneration, or reimbursement, and the amount of compensation, remuneration, or reimbursement for each such code. The code and code modifier shall refer to the most recent American Medical Association code book and other recognized codes as adopted and used in the Medicare and Medicaid programs of the state and federal government.
- 5. The MO HealthNet division may promulgate rules for implementation of this section. Any rule or portion of a rule, as that term is defined in section 536.010, RSMo, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536, RSMo, and, if applicable, section 536.028, RSMo. This section and chapter 536, RSMo, are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536, RSMo, to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2008, shall be invalid and void.