

House \_\_\_\_\_ Amendment NO. \_\_\_\_\_

Offered By \_\_\_\_\_

1 AMEND House Committee Substitute for House Bill No. 1662, Page 6, Section 208.166, Line 108,  
2 by inserting after all of said section and line the following:

3  
4 "208.930. 1. As used in this section, the following [term] terms mean:

5 (1) "Department", [shall mean] the department of health and senior services[.];

6 (2) "Personal care attendant", a person, including the consumer's spouse, who performs  
7 personal care assistance services for the consumer.

8 2. Subject to appropriations, the department may provide financial assistance for  
9 consumer-directed personal care assistance services through eligible vendors, as provided in sections  
10 208.900 through 208.927, to each person who was participating as a non-MO HealthNet eligible  
11 client pursuant to sections 178.661 through 178.673 on June 30, 2005, and who:

12 (1) Makes application to the department;

13 (2) Demonstrates financial need and eligibility under subsection 3 of this section;

14 (3) Meets all the criteria set forth in sections 208.900 through 208.927, except for  
15 subdivision (5) of subsection 1 of section 208.903 and subdivision (6) of section 208.900;

16 (4) Has been found by the department of social services not to be eligible to participate under  
17 guidelines established by the MO HealthNet plan; and

18 (5) Does not have access to affordable employer-sponsored health care insurance or other  
19 affordable health care coverage for personal care assistance services as defined in section 208.900.

20 For purposes of this section, "access to affordable employer-sponsored health care insurance or other  
21 affordable health care coverage" refers to health insurance requiring a monthly premium less than or  
22 equal to one hundred thirty-three percent of the monthly average premium required in the state's  
23 current Missouri consolidated health care plan.

24 Payments made by the department under the provisions of this section shall be made only after all  
25 other available sources of payment have been exhausted.

26 3. (1) In order to be eligible for financial assistance for consumer-directed personal care  
27 assistance services under this section, a person shall demonstrate financial need, which shall be based  
28 on the adjusted gross income and the assets of the person seeking financial assistance and such  
29 person's spouse.

30 (2) In order to demonstrate financial need, a person seeking financial assistance under this  
31 section and such person's spouse must have an adjusted gross income, less disability-related medical  
32 expenses, as approved by the department, that is equal to or less than three hundred percent of the  
33 federal poverty level. The adjusted gross income shall be based on the most recent income tax  
34 return.

35 (3) No person seeking financial assistance for personal care services under this section and  
36 such person's spouse shall have assets in excess of two hundred fifty thousand dollars.

Action Taken \_\_\_\_\_ Date \_\_\_\_\_

1           4. The department shall require applicants and the applicant's spouse, and consumers and the  
2 consumer's spouse, to provide documentation for income, assets, and disability-related medical  
3 expenses for the purpose of determining financial need and eligibility for the program. In addition to  
4 the most recent income tax return, such documentation may include, but shall not be limited to:

5           (1) Current wage stubs for the applicant or consumer and the applicant's or consumer's  
6 spouse;

7           (2) A current W-2 form for the applicant or consumer and the applicant's or consumer's  
8 spouse;

9           (3) Statements from the applicant's or consumer's and the applicant's or consumer's spouse's  
10 employers;

11           (4) Wage matches with the division of employment security;

12           (5) Bank statements; and

13           (6) Evidence of disability-related medical expenses and proof of payment.

14           5. A personal care assistance services plan shall be developed by the department pursuant to  
15 section 208.906 for each person who is determined to be eligible and in financial need under the  
16 provisions of this section. The plan developed by the department shall include the maximum amount  
17 of financial assistance allowed by the department, subject to appropriation, for such services.

18           6. Each consumer who participates in the program is responsible for a monthly premium  
19 equal to the average premium required for the Missouri consolidated health care plan; provided that  
20 the total premium described in this section shall not exceed five percent of the consumer's and the  
21 consumer's spouse's adjusted gross income for the year involved.

22           7. (1) Nonpayment of the premium required in subsection 6 shall result in the denial or  
23 termination of assistance, unless the person demonstrates good cause for such nonpayment.

24           (2) No person denied services for nonpayment of a premium shall receive services unless  
25 such person shows good cause for nonpayment and makes payments for past-due premiums as well  
26 as current premiums.

27           (3) Any person who is denied services for nonpayment of a premium and who does not make  
28 any payments for past-due premiums for sixty consecutive days shall have their enrollment in the  
29 program terminated.

30           (4) No person whose enrollment in the program is terminated for nonpayment of a premium  
31 when such nonpayment exceeds sixty consecutive days shall be reenrolled unless such person pays  
32 any past-due premiums as well as current premiums prior to being reenrolled. Nonpayment shall  
33 include payment with a returned, refused, or dishonored instrument.

34           8. (1) Consumers determined eligible for personal care assistance services under the  
35 provisions of this section shall be reevaluated annually to verify their continued eligibility and  
36 financial need. The amount of financial assistance for consumer-directed personal care assistance  
37 services received by the consumer shall be adjusted or eliminated based on the outcome of the  
38 reevaluation. Any adjustments made shall be recorded in the consumer's personal care assistance  
39 services plan.

40           (2) In performing the annual reevaluation of financial need, the department shall annually  
41 send a reverification eligibility form letter to the consumer requiring the consumer to respond within  
42 ten days of receiving the letter and to provide income and disability-related medical expense  
43 verification documentation. If the department does not receive the consumer's response and  
44 documentation within the ten-day period, the department shall send a letter notifying the consumer  
45 that he or she has ten days to file an appeal or the case will be closed.

46           (3) The department shall require the consumer and the consumer's spouse to provide  
47 documentation for income and disability-related medical expense verification for purposes of the  
48 eligibility review. Such documentation may include but shall not be limited to the documentation

1 listed in subsection 4 of this section.

2 9. (1) Applicants for personal care assistance services and consumers receiving such  
3 services pursuant to this section are entitled to a hearing with the department of social services if  
4 eligibility for personal care assistance services is denied, if the type or amount of services is set at a  
5 level less than the consumer believes is necessary, if disputes arise after preparation of the personal  
6 care assistance plan concerning the provision of such services, or if services are discontinued as  
7 provided in section 208.924. Services provided under the provisions of this section shall continue  
8 during the appeal process.

9 (2) A request for such hearing shall be made to the department of social services in writing  
10 in the form prescribed by the department of social services within ninety days after the mailing or  
11 delivery of the written decision of the department of health and senior services. The procedures for  
12 such requests and for the hearings shall be as set forth in section 208.080.

13 10. Unless otherwise provided in this section, all other provisions of sections 208.900  
14 through 208.927 shall apply to individuals who are eligible for financial assistance for personal care  
15 assistance services under this section.

16 11. The department may promulgate rules and regulations, including emergency rules, to  
17 implement the provisions of this section. Any rule or portion of a rule, as that term is defined in  
18 section 536.010, that is created under the authority delegated in this section shall become effective  
19 only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable,  
20 section 536.028. Any provisions of the existing rules regarding the personal care assistance program  
21 promulgated by the department of elementary and secondary education in title 5, code of state  
22 regulations, division 90, chapter 7, which are inconsistent with the provisions of this section are void  
23 and of no force and effect.

24 12. The provisions of this section shall expire on June 30, 2019."; and

25  
26 Further amend said bill by amending the title, enacting clause, and intersectional references  
27 accordingly.  
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