

House _____ Amendment NO. _____

Offered By _____

1 AMEND House Committee Substitute for Senate Bill No. 275, Page 22, Section 196.100, Line 18,
2 by inserting after all of said section and line the following:

3
4 "208.207. 1. Beginning January 1, 2020, individuals nineteen years of age or older and
5 under sixty-five years of age who are not otherwise eligible for MO HealthNet services under this
6 chapter, who qualify for MO HealthNet services under 42 U.S.C. Section 1396a(a)(10)(A)(i)(VIII)
7 and as set forth in 42 CFR 435.119, and who have income at or below one hundred thirty-three
8 percent of the federal poverty level plus five percent of the applicable family size as determined
9 under 42 U.S.C. Section 1396a(e)(14) and as set forth in 42 CFR 435.603 shall be eligible for
10 medical assistance under MO HealthNet and shall receive coverage for the health benefits service
11 package.

12 2. For purposes of this section, "health benefits service package" shall mean, subject to
13 federal approval, benefits covered by the MO HealthNet program as determined by the department
14 of social services to meet the benchmark or benchmark-equivalent coverage requirement under 42
15 U.S.C. Section 1396a(k)(1).

16 3. The reimbursement rate to MO HealthNet providers for MO HealthNet services provided
17 to individuals qualifying under the provisions of this section shall be comparable to commercial
18 reimbursement payment levels with trend adjustment for comparable services. The rates shall be
19 determined annually by the department of social services and the department may develop such
20 rates through a contracted actuary. The higher commercial comparable rates shall only apply for
21 services provided to individuals qualifying under this section.

22 4. (1) The department of social services shall discontinue eligibility for persons who are
23 eligible under subsection 1 of this section if:

24 (a) The federal medical assistance percentage established under 42 U.S.C. Section 1396d(y)
25 or 1396d(z) is less than ninety percent as specified for the year 2020 and each year thereafter or an
26 amount determined by the MO HealthNet oversight committee to be necessary to maintain state
27 budget solvency, whichever is lower; or

28 (b) The general assembly votes to discontinue eligibility for persons who are eligible under
29 subsection 1 of this section. Prior to any vote under this paragraph, the MO HealthNet oversight
30 committee and the department of social services shall provide the general assembly with
31 information on the current and projected expenses incurred due to expanding eligibility to persons
32 under subsection 1 of this section in relation to health-related savings and revenues and health
33 outcomes of individuals and families receiving benefits under subsection 1 of this section.

34 (2) The department of social services shall inform persons eligible under subsection 1 of this
35 section that their benefits may be reduced or eliminated if federal funding decreases or is eliminated.

36 5. The MO HealthNet oversight committee shall conduct research and investigate any

Action Taken _____ Date _____

1 potential health-related savings and revenues associated with expanding eligibility to persons under
2 subsection 1 of this section. The committee shall investigate the federal matching rate below which
3 the state cannot maintain the expanded eligibility to persons under subsection 1 of this section. If
4 the amount is determined to be greater than ninety percent, the committee shall report its findings to
5 the general assembly for its consideration prior to any vote under paragraph (b) of subdivision (1) of
6 subsection 4 of this section. In conducting its research and investigation, the committee shall also
7 determine the feasibility of:

8 (1) Implementing capped cost-sharing for persons eligible under subsection 1 of this section,
9 which may be reduced based on healthy behaviors of participants;

10 (2) Expanding Medicaid coverage for certain health care services that are currently financed
11 by the state; and

12 (3) Enrolling persons under subsection 1 of this section in private health benefit plans."; and
13

14 Further amend said bill by amending the title, enacting clause, and intersectional references
15 accordingly.