

SECOND REGULAR SESSION

HOUSE BILL NO. 1467

95TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVES NANCE (Sponsor), FUNDERBURK, WALTON GRAY,
STORCH, GRISAMORE, KIRKTON AND SATER (Co-sponsors).

3789L.011

D. ADAM CRUMBLISS, Chief Clerk

AN ACT

To repeal section 208.650, RSMo, and to enact in lieu thereof one new section relating to health insurance for uninsured children.

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

Section A. Section 208.650, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 208.650, to read as follows:

208.650. 1. The department of social services shall commission a study on the impact of this program on providing a comprehensive array of community-based wraparound services for seriously emotionally disturbed children and children affected by substance abuse. The department shall issue a report to the general assembly within forty-five days of the twelve-month anniversary of the beginning of this program and yearly thereafter. This report shall include recommendations to the department on how to improve access to the provisions of community-based wraparound services pursuant to sections 208.631 to 208.660.

2. The department of social services shall prepare an annual report to the governor and the general assembly on the effect of this program. The report shall include, but is not limited to:

- (1) The number of children participating in the program in each income category;
- (2) The effect of the program on the number of children covered by private insurers;
- (3) The effect of the program on medical facilities, particularly emergency rooms;
- (4) The overall effect of the program on the health care of Missouri residents;
- (5) The overall cost of the program to the state of Missouri; and

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.

16 (6) The methodology used to determine availability for the purpose of enrollment, as
17 established by rule.

18 3. The department of social services shall establish an identification program to identify
19 children not participating in the program though eligible for extended medical coverage. The
20 department's efforts to identify these uninsured children shall include, but not be limited to:

21 (1) Working closely with hospitals and other medical facilities; and

22 (2) Establishing a statewide education and information program;

23 **(3) Providing all public school districts in this state with written information**
24 **regarding eligibility criteria and application procedures for the program to be distributed**
25 **by the school districts to parents and guardians at the time of enrollment of students;**

26 **(4) Cross-checking databases, including but not limited to the FAMOUS database**
27 **system, to identify low-income families participating in other public assistance programs,**
28 **such as food stamps, hot lunch program, and temporary assistance for needy families, but**
29 **who are not currently participating in the SCHIP program.**

30 4. The department of social services shall commission a study on any negative impact
31 this program may have on the number of children covered by private insurance as a result of
32 expanding health care coverage to children with a gross family income above one hundred
33 eighty-five percent of the federal poverty level. The department shall issue a report to the general
34 assembly within forty-five days of the twelve-month anniversary of the beginning of this
35 program and annually thereafter. If this study demonstrates that a measurable negative impact
36 on the number of privately insured children is occurring, the department shall take one or more
37 of the following measures targeted at eliminating the negative impact:

38 (1) Implementing additional co-payments, sliding scale premiums or other cost-sharing
39 provisions;

40 (2) Adding an insurability test to preclude participation;

41 (3) Increasing the length of the required period of uninsured status prior to application;

42 (4) Limiting enrollment to an annual open enrollment period for children with gross
43 family incomes above one hundred eighty-five percent of the federal poverty level; and

44 (5) Any other measures designed to efficiently respond to the measurable negative
45 impact.

✓