

**Representative Kory M. Holdaway** proposes the following substitute bill:

**PROMOTION OF HEALTH CARE COVERAGE**

2008 GENERAL SESSION

STATE OF UTAH

**Chief Sponsor: Kory M. Holdaway**

Senate Sponsor: Peter C. Knudson

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**LONG TITLE**

**General Description:**

This bill amends the Medical Assistance Act and the Individual, Small Employer, and Group Health Insurance Act.

**Highlighted Provisions:**

This bill:

► requires the Department of Workforce Services, the State Board of Education, and the department to:

- collaborate with one another to develop a process to ~~H~~→ [identify] promote ←~~H~~ the health insurance ~~H~~→ [status-of-certain] awareness and coverage of ←~~H~~ children in ~~H~~→ [public] ←~~H~~ schools;

- report to the Legislature on the development of the process; and
- implement the process no later than the 2009-10 school year;

► requires the Department of Workforce Services to promote and facilitate the enrollment of the children identified in public schools without health insurance in the Utah Children's Health Insurance Program or the Medicaid program; and

► provides that under certain conditions an individual who qualifies for premium assistance under the Utah's Premium Partnership for Health Insurance Program, or the individual's dependents, may enroll in an employer health benefit plan outside an open enrollment period.



26 **Monies Appropriated in this Bill:**

27 This bill appropriates:

- 28 ▶ as an ongoing appropriation subject to future budget constraints, ~~§~~→ [\$100,000] \$60,000 ←~~§~~
- 28a from the
- 29 General Fund for fiscal year 2008-09 to the Division of Health Care Financing
- 30 within the Department of Health to promote awareness of and facilitate enrollment
- 31 in the Utah's Premium Partnership for Health Insurance Program.

32 **Other Special Clauses:**

33 None

34 **Utah Code Sections Affected:**

35 ENACTS:

36 **26-18-12**, Utah Code Annotated 195337 **31A-22-610.6**, Utah Code Annotated 195339 *Be it enacted by the Legislature of the state of Utah:*40 Section 1. Section **26-18-12** is enacted to read:

41 **26-18-12. Process to** ~~H~~→ [identify] promote ←~~H~~ health insurance ~~H~~→ [status of certain]

41a coverage for ←~~H~~ children --

42 ~~H~~→ [~~Promoting enrollment of children~~] ←~~H~~ .

43 (1) The Department of Workforce Services, the State Board of Education, and the

44 department shall:

45 (a) collaborate with one another to develop a process to ~~H~~→ [~~identify the~~] promote ←~~H~~

45a health insurance

46 ~~H~~→ [~~status of a~~] coverage for a ←~~H~~ child in ~~H~~→ [~~a public~~] ←~~H~~ school ~~H~~→ [~~at the time~~]

46a when ←~~H~~ :

47 (i) the child applies for free or reduced price school lunch; ~~H~~→ [~~or~~] ←~~H~~48 (ii) a ~~H~~→ [~~certificate of immunization required under Title 53A, Chapter 11, Part 3,~~49 immunization of students, is submitted on behalf of the child] child enrolls in or registers in school;49a and49b (iii) other appropriate school related opportunities ←~~H~~ ;

50 (b) report to the Legislature on the development of the process under Subsection (1)(a)

51 no later than November 19, 2008; and

52 (c) implement the process developed under Subsection (1)(a) no later than the 2009-10

53 school year.

54 (2) The Department of Workforce Services shall promote and facilitate the enrollment

55 of children identified under Subsection (1)(a) without health insurance in the Utah Children's

56 Health Insurance Program ~~H~~→ [~~or~~] , ←~~H~~ the Medicaid program ~~H~~→ , or the Utah Premium

56a Partnership for Health Insurance Program ←~~H~~ .

57 Section 2. Section **31A-22-610.6** is enacted to read:

58 **31A-22-610.6. Special enrollment for individuals receiving premium assistance.**

59 (1) As used in this section:

60 (a) "Premium assistance" means assistance under Title 26, Chapter 18, Medical  
61 Assistance Act, in the payment of premium.

62 (b) "Qualified beneficiary" means an individual who is approved to receive premium  
63 assistance.

64 (2) Subject to the other provisions in this section, an individual may enroll under this  
65 section at a time outside of an employer health benefit plan open enrollment period, regardless  
66 of previously waiving coverage, if the individual is:

67 (a) a qualified beneficiary who is eligible for coverage as an employee under the  
68 employer health benefit plan; or

69 (b) a dependent of the qualified beneficiary who is eligible for coverage under the  
70 employer health benefit plan.

71 (3) To be eligible to enroll outside of an open enrollment period, an individual  
72 described in Subsection (2) shall enroll in the employer health benefit plan by no later than 30  
73 days from the day on which the qualified beneficiary receives written notification that the  
74 qualified beneficiary is eligible to receive premium assistance.

75 (4) An individual described in Subsection (2) may enroll under this section only in an  
76 employer's health benefit plan that is available at the time of enrollment to similarly situated  
77 eligible employees or dependents of eligible employees.

78 (5) Coverage under an employer health benefit plan for an individual described in  
79 Subsection (2) may begin as soon as the first day of the month immediately following  
80 enrollment of the individual in accordance with this section.

81 (6) This section does not modify any requirement related to premiums that applies  
82 under an employer health benefit plan to a similarly situated eligible employee or dependent of  
83 an eligible employee under the employer health benefit plan.

84 (7) An employer health benefit plan may require an individual described in Subsection  
85 (2) to satisfy a preexisting condition waiting period that:

86 (a) is allowed under the Health Insurance Portability and Accountability Act of 1996,  
87 Pub. L. 104-191, 110 Stat. 1936; and

88           (b) is not longer than 12 months.

89           Section 3. **Appropriation.**

90           As an ongoing appropriation subject to future budget constraints, there is appropriated  
91 from the General Fund for fiscal year 2008-09, \$→ [~~\$100,000~~] 60,000 ←\$ to the Division of Health Care  
92 Financing within the Department of Health to promote awareness of and facilitate enrollment  
93 in the Utah's Premium Partnership for Health Insurance Program.

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**Fiscal Note****H.B. 364 2nd Sub. (Gray) - Promotion of Health Care Coverage - As Amended**2008 General Session  
State of Utah

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**State Impact**

This Legislation appropriates \$60,000 ongoing General Fund to go with \$60,000 in federal matching funds to the Department of Health for the promotion of Utah's Premium Partnership for Health Insurance Program. If outreach is successful, the state may incur additional costs associated with the increased Medicaid caseloads.

	<u>FY 2008</u> <u>Approp.</u>	<u>FY 2009</u> <u>Approp.</u>	<u>FY 2010</u> <u>Approp.</u>	<u>FY 2008</u> <u>Revenue</u>	<u>FY 2009</u> <u>Revenue</u>	<u>FY 2010</u> <u>Revenue</u>
General Fund	\$0	\$60,000	\$60,000	\$0	\$0	\$0
Federal Funds	\$0	\$60,000	\$60,000	\$0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$120,000</b>	<b>\$120,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Individual, Business and/or Local Impact**

Individuals who decide to enroll in the Medicaid program because of the outreach program will receive medical assistance. Businesses who serve the new Medicaid clients will have an increase in revenues. Enactment of this bill likely will not result in direct, measurable costs and/or benefits for local governments.