	HEALTH AMENDMENTS FOR LEGAL								
	IMMIGRANT CHILDREN								
	2010 GENERAL SESSION								
	STATE OF UTAH								
	Chief Sponsor: Luz Robles House Sponsor:								
	LONG TITLE								
	General Description:								
	This bill amends the Medical Assistance Act and the Utah Children's Health Insurance								
	Act to provide Medicaid coverage and health insurance coverage to a legal immigrant								
	child, regardless of the length of time that the child has been in the United States.								
	Highlighted Provisions:								
	This bill:								
	 exercises the option to remove the five-year residency requirement for a legal 								
	immigrant child to be eligible for coverage under Medicaid or the Utah Children's								
	Health Insurance Program; and								
	 directs the Department of Health to amend the state Medicaid plan and the Utah 								
	Children's Health Insurance Program to provide coverage to an eligible legal								
	immigrant child, regardless of the length of time that the child has been in the								
	United States.								
	Monies Appropriated in this Bill:								
	None								
	Other Special Clauses:								
	None								
	Utah Code Sections Affected:								
	ENACTS:								



26-18-3.3 , Utah Code Annotated 1953
26-40-115 , Utah Code Annotated 1953
Be it enacted by the Legislature of the state of Utah:
Section 1. Section 26-18-3.3 is enacted to read:
26-18-3.3. Coverage for legal immigrant children.
In accordance with the provisions of the federal Children's Health Insurance Program
Reauthorization Act of 2009, Pub. L. No. 111-3, and all other applicable requirements of
federal law and rule, the department shall amend the state Medicaid plan to provide coverage
under the Medicaid program to a client who is:
(1) a child; and
(2) a legal immigrant to the United States, regardless of the length of time that the
person described in Subsection (1) has been in the United States.
Section 2. Section 26-40-115 is enacted to read:
26-40-115. Coverage for legal immigrant pregnant women and children.
In accordance with the provisions of the federal Children's Health Insurance Program
Reauthorization Act of 2009, Pub. L. No. 111-3, and all other applicable requirements of
federal law and rule, the department shall provide coverage under the program to a person who
<u>is:</u>
(1) an eligible child; and
(2) a legal immigrant to the United States, regardless of the length of time that the
person described in Subsection (1) has been in the United States.

Legislative Review Note as of 9-28-09 10:16 AM

S.B. 44

Office of Legislative Research and General Counsel

01-21-10 1:21 PM

S.B. 44 - Health Amendments for Legal Immigrant Children

Fiscal Note

2010 General Session State of Utah

State Impact

This Legislation requires an FY 2010 one-time appropriation of \$1,000 General Fund plus \$1,000 Federal Funds to the Department of Workforce Services and \$47,100 General Fund plus \$8,000 American Recovery and Reinvestment Act plus \$167,400 Federal Funds (\$222,500 total) to the Department of Health. It requires an ongoing appropriation beginning in FY 2011 of \$26,500 General Fund plus \$48,800 Federal Funds (\$75,300 total) to the Department of Workforce Services and \$442,100 General Fund plus \$1,337,900 Federal Funds (\$1,780,000 total) to the Department of Health. The FY 2011 General Fund appropriation to the Department of Health is temporarily offset by a \$32,200 from the American Recovery and Reinvestment Act. Medicaid's emergency medical spending may be reduced.

	FY 2010	FY 2011 <u>Approp.</u>	FY 2012	FY 2010	FY 2011 Revenue	Revenue
	Approp.		Approp.	Revenue		
General Fund	\$0	\$468,600	\$468,600	4n	\$0	\$0
General Fund, One-Time	\$48,100	(\$32,200)	\$0	\$0	\$0	\$0
Federal Funds	\$168,400	\$1,386,700	\$1,500,700 B	\$0	\$0	\$0
Other	\$8,000	\$32,200	\$0	\$0	20	\$0
Total	\$224,500	\$1,855,300	\$1,855,300	<u>\$0</u>	\$0	\$0

Individual, Business and/or Local Impact

Enactment of this bill likely will not result in direct, measurable costs and/or benefits for businesses or local governments. Some individuals may benefit from Medicaid and Children's Health Insurance Program spending.

2/2/2010, 2:03:15 PM, Lead Analyst: Frandsen, R./Attny: TRV

Office of the Legislative Fiscal Analyst