

## 93RD GENERAL ASSEMBLY

#### State of Illinois

### 2003 and 2004

Introduced 02/09/04, by Raymond Poe

#### SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-2

from Ch. 23, par. 5-2

Amends the Illinois Public Aid Code. In provisions concerning the extension of Medicaid coverage for persons who become ineligible for TANF due to employment earnings, increases the maximum period of extended coverage from 12 months to 24 months. Effective immediately.

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FISCAL NOTE ACT MAY APPLY

A BILL FOR

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AN ACT in relation to public aid.

# 2 Be it enacted by the People of the State of Illinois, 3 represented in the General Assembly:

4 Section 5. The Illinois Public Aid Code is amended by 5 changing Section 5-2 as follows:

6 (305 ILCS 5/5-2) (from Ch. 23, par. 5-2)

Sec. 5-2. Classes of Persons Eligible. Medical assistance under this Article shall be available to any of the following classes of persons in respect to whom a plan for coverage has been submitted to the Governor by the Illinois Department and approved by him:

Recipients of basic maintenance grants under Articles
 III and IV.

14 2. Persons otherwise eligible for basic maintenance under 15 Articles III and IV but who fail to qualify thereunder on the 16 basis of need, and who have insufficient income and resources 17 to meet the costs of necessary medical care, including but not 18 limited to the following:

19 (a) All persons otherwise eligible for basic 20 maintenance under Article III but who fail to qualify under 21 that Article on the basis of need and who meet either of 22 the following requirements:

23 (i) their income, as determined by the Illinois accordance 24 Department in with any federal 25 requirements, is equal to or less than 70% in fiscal 26 year 2001, equal to or less than 85% in fiscal year 2002 and until a date to be determined by the 27 28 Department by rule, and equal to or less than 100% 29 beginning on the date determined by the Department by 30 rule, of the nonfarm income official poverty line, as defined by the federal Office of Management and Budget 31 and revised annually in accordance with Section 673(2) 32

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of the Omnibus Budget Reconciliation Act of 1981, applicable to families of the same size; or

(ii) their income, after the deduction of costs 3 incurred for medical care and for other types of 4 5 remedial care, is equal to or less than 70% in fiscal 6 year 2001, equal to or less than 85% in fiscal year 2002 and until a date to be determined by 7 the Department by rule, and equal to or less than 100% 8 9 beginning on the date determined by the Department by 10 rule, of the nonfarm income official poverty line, as 11 defined in item (i) of this subparagraph (a).

(b) All persons who would be determined eligible for
such basic maintenance under Article IV by disregarding the
maximum earned income permitted by federal law.

15 3. Persons who would otherwise qualify for Aid to the16 Medically Indigent under Article VII.

4. Persons not eligible under any of the preceding paragraphs who fall sick, are injured, or die, not having sufficient money, property or other resources to meet the costs of necessary medical care or funeral and burial expenses.

5. (a) Women during pregnancy, after the fact of pregnancy 21 has been determined by medical diagnosis, and during the 22 23 60-day period beginning on the last day of the pregnancy, together with their infants and children born after 24 25 September 30, 1983, whose income and resources are insufficient to meet the costs of necessary medical care to 26 27 the maximum extent possible under Title XIX of the Federal 28 Social Security Act.

29 (b) The Illinois Department and the Governor shall 30 provide a plan for coverage of the persons eligible under 31 paragraph 5(a) by April 1, 1990. Such plan shall provide 32 ambulatory prenatal care to pregnant women during a presumptive eligibility period and establish an income 33 eligibility standard that is equal to 133% of the nonfarm 34 35 income official poverty line, as defined by the federal Office of Management and Budget and revised annually in 36

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accordance with Section 673(2) of the Omnibus Budget Reconciliation Act of 1981, applicable to families of the same size, provided that costs incurred for medical care are not taken into account in determining such income eligibility.

6 (C) The Illinois Department may conduct а 7 demonstration in at least one county that will provide medical assistance to pregnant women, together with their 8 infants and children up to one year of age, where the 9 income eligibility standard is set up to 185% of the 10 11 nonfarm income official poverty line, as defined by the 12 federal Office of Management and Budget. The Illinois Department shall seek and obtain necessary authorization 13 provided under federal law to implement 14 such a demonstration. Such demonstration may establish resource 15 16 standards that are not more restrictive than those 17 established under Article IV of this Code.

6. Persons under the age of 18 who fail to qualify as dependent under Article IV and who have insufficient income and resources to meet the costs of necessary medical care to the maximum extent permitted under Title XIX of the Federal Social Security Act.

7. Persons who are under 21 years of age and would qualify as disabled as defined under the Federal Supplemental Security Income Program, provided medical service for such persons would be eligible for Federal Financial Participation, and provided the Illinois Department determines that:

(a) the person requires a level of care provided by a
hospital, skilled nursing facility, or intermediate care
facility, as determined by a physician licensed to practice
medicine in all its branches;

32 (b) it is appropriate to provide such care outside of 33 an institution, as determined by a physician licensed to 34 practice medicine in all its branches;

35 (c) the estimated amount which would be expended for
 36 care outside the institution is not greater than the

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1 estimated amount which would be expended in an institution. 2 8. Persons who become ineligible for basic maintenance assistance under Article IV of this Code in programs 3 administered by the Illinois Department due to employment 4 5 earnings and persons in assistance units comprised of adults 6 and children who become ineligible for basic maintenance assistance under Article VI of this Code due to employment 7 earnings. The plan for coverage for this class of persons 8 9 shall:

10 (a) extend the medical assistance coverage for up to <u>24</u>
11 <u>12</u> months following termination of basic maintenance
12 assistance; and

(b) offer persons who have initially received 6 months of the coverage provided in paragraph (a) above, the option of receiving an additional 6 months of coverage, subject to the following:

17 (i) such coverage shall be pursuant to provisions18 of the federal Social Security Act;

19 (ii) such coverage shall include all services
20 covered while the person was eligible for basic
21 maintenance assistance;

(iii) no premium shall be charged for suchcoverage; and

(iv) such coverage shall be suspended in the event
of a person's failure without good cause to file in a
timely fashion reports required for this coverage
under the Social Security Act and coverage shall be
reinstated upon the filing of such reports if the
person remains otherwise eligible.

9. Persons with acquired immunodeficiency syndrome (AIDS) or with AIDS-related conditions with respect to whom there has been a determination that but for home or community-based services such individuals would require the level of care provided in an inpatient hospital, skilled nursing facility or intermediate care facility the cost of which is reimbursed under this Article. Assistance shall be provided to such - 5 - LRB093 18319 DRJ 44025 b

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persons to the maximum extent permitted under Title XIX of the
 Federal Social Security Act.

10. Participants in the long-term care insurance
partnership program established under the Partnership for
Long-Term Care Act who meet the qualifications for protection
of resources described in Section 25 of that Act.

7 11. Persons with disabilities who are employed and eligible
8 for Medicaid, pursuant to Section 1902(a)(10)(A)(ii)(xv) of
9 the Social Security Act, as provided by the Illinois Department
10 by rule.

12. Subject to federal approval, persons who are eligible 12 for medical assistance coverage under applicable provisions of 13 the federal Social Security Act and the federal Breast and 14 Cervical Cancer Prevention and Treatment Act of 2000. Those 15 eligible persons are defined to include, but not be limited to, 16 the following persons:

17 (1) persons who have been screened for breast or cervical cancer under the U.S. Centers for Disease Control 18 Prevention Breast and Cervical Cancer 19 and Program established under Title XV of the federal Public Health 20 Services Act in accordance with the requirements of Section 21 1504 of that Act as administered by the Illinois Department 22 of Public Health; and 23

(2) persons whose screenings under the above program
were funded in whole or in part by funds appropriated to
the Illinois Department of Public Health for breast or
cervical cancer screening.

"Medical assistance" under this paragraph 12 shall be identical to the benefits provided under the State's approved plan under Title XIX of the Social Security Act. The Department must request federal approval of the coverage under this paragraph 12 within 30 days after the effective date of this amendatory Act of the 92nd General Assembly.

The Illinois Department and the Governor shall provide a plan for coverage of the persons eligible under paragraph 7 as soon as possible after July 1, 1984. - 6 - LRB093 18319 DRJ 44025 b

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1 The eligibility of any such person for medical assistance 2 under this Article is not affected by the payment of any grant 3 under the Senior Citizens and Disabled Persons Property Tax 4 Relief and Pharmaceutical Assistance Act or any distributions 5 or items of income described under subparagraph (X) of paragraph (2) of subsection (a) of Section 203 of the Illinois 6 Income Tax Act. The Department shall by rule establish the 7 8 amounts of assets to be disregarded in determining eligibility 9 for medical assistance, which shall at a minimum equal the amounts to be disregarded under the Federal Supplemental 10 11 Security Income Program. The amount of assets of a single 12 person to be disregarded shall not be less than \$2,000, and the 13 amount of assets of a married couple to be disregarded shall not be less than \$3,000. 14

To the extent permitted under federal law, any person found guilty of a second violation of Article VIIIA shall be ineligible for medical assistance under this Article, as provided in Section 8A-8.

The eligibility of any person for medical assistance under this Article shall not be affected by the receipt by the person of donations or benefits from fundraisers held for the person in cases of serious illness, as long as neither the person nor members of the person's family have actual control over the donations or benefits or the disbursement of the donations or benefits.

26 (Source: P.A. 92-16, eff. 6-28-01; 92-47, eff. 7-3-01; 92-597, 27 eff. 6-28-02; 93-20, eff. 6-20-03.)

28 Section 99. Effective date. This Act takes effect upon 29 becoming law.