

SECOND REGULAR SESSION  
[P E R F E C T E D]  
SENATE SUBSTITUTE NO. 2 FOR  
SENATE COMMITTEE SUBSTITUTE FOR  
**SENATE BILL NO. 632**  
**89TH GENERAL ASSEMBLY**

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INTRODUCED BY SENATOR QUICK.

Offered March 2, 1998.

Senate Substitute adopted, March 2, 1998.

Taken up for Perfection March 2, 1998. Bill declared Perfected and Ordered Printed, as amended.

TERRY L. SPIELER, Secretary.

S2871.18P

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**AN ACT**

To amend chapter 208, RSMo, by adding thereto two new sections relating to providing health care for certain uninsured children, with an expiration date for certain sections.

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

Section A. Chapter 208, RSMo is amended, by adding thereto two new sections, to be known as sections 208.183 and 1, to read as follows:

**208.183. 1. Notwithstanding any other provision of law to the contrary, the department of social services shall establish a program to pay for health care for uninsured children. Coverage pursuant to this act is subject to appropriation. The provisions of this section shall be void and of no effect after July 1, 2002.**

**2. For the purposes of this section, "children" are persons up to nineteen years of age. "Uninsured children" are persons up to nineteen years of age who have not had access to employer subsidized health care insurance or other health care coverage for six months prior to application, are residents of the state of Missouri, and have parents or guardians who meet the requirements in subsection 4 of this section. A child who is eligible for medical assistance as authorized in section 208.151, RSMo, is not uninsured for the purposes of this section.**

**3. The department is authorized to pay for health care for uninsured children whose parents or guardians have an available income up to three hundred percent of the federal poverty level.**

**4. Parents and guardians of uninsured children eligible for the program established in this section shall:**

**(1) Furnish to the department of social services the uninsured child's social security number or numbers, if the uninsured child has more than one such number;**

**(2) Cooperate with the department of social services in identifying and providing information to assist the state in pursuing any third party insurance carrier who may be liable to pay for health care;**

**(3) Cooperate with the department of social services, division of child support enforcement in establishing paternity and in obtaining support payments, including medical support; and**

**(4) Demonstrate annually their child's participation in wellness programs including inoculations and an annual physical examination.**

**5. Parents and guardians of uninsured children with available incomes between one hundred eighty five and two hundred twenty five percent of the federal poverty level are responsible for a five dollar copayment. Parents and guardians of uninsured children with available incomes between two hundred twenty five and two hundred fifty percent of the federal poverty level are responsible for a five dollar copayment and a monthly premium of fifteen dollars for the first child and five dollars for each additional child in the managed health care package provided by the department of social services. Parents and guardians of uninsured children with available incomes between two hundred fifty and two hundred seventy five percent of the federal poverty level are responsible for a five dollar copayment and a monthly premium of thirty dollars for the first child and five dollars for each additional child in the managed health care package provided by the department of social services. Parents and guardians of uninsured children with available incomes between two hundred seventy five and three hundred percent of the federal poverty level are responsible for a five dollar copayment and a monthly premium of fifty dollars for the first child and five dollars for each additional child in the managed health care package provided by the department of social services. No copayments or other cost sharing is permitted with respect to benefits for well-baby and well-child care including age appropriate immunizations.**

**6. The department of social services shall implement policies establishing a program to pay for health care for uninsured children by rules promulgated pursuant to chapter 536, RSMo, either statewide or in certain geographic areas, subject to obtaining necessary federal approval and appropriation authority. The rules may provide for a health care services package that does not include all medical services covered by section 208.152.**

**7. "Available income" shall be determined by the department of social services**

by rule, which shall comply with federal laws and regulations relating to the state's eligibility to receive federal funds to implement the insurance program established in this section.

8. The department of social services shall commission a study on the impact of this program on providing a comprehensive array of community-based wrap around 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 wrap around services under this act.

9. 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; and

(4) The overall effect of the program on the health care of Missouri residents.

10. The department of social services shall establish an identification program to identify children not participating in the program though eligible for extended medical coverage.

The department's efforts to identify these uninsured children shall include, but not be limited to:

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

(2) Establishing a statewide education and information program.

11. The department of social services shall commission a study on any negative impact this program may have on the number of children covered by private insurance as a result of expanding health care coverage to children with a gross family income above one hundred eighty-five percent of the federal poverty level. 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 annually thereafter. If this study demonstrates that a measurable negative impact on the number of privately insured children is occurring, the department shall take one or more of the following measures targeted at eliminating the negative impact:

(1) Implementing copayments, sliding scale premiums or other cost sharing

**provisions;**

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

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

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

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

**Section 1. Ten percent of any federal funds received under the provisions of Title XXI of the Social Security Act and ten percent of any state funds used to match those federal funds shall be used for outlays through the department of health to local public health agencies for children's health programs.**

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Bill

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