

SECOND REGULAR SESSION

SENATE BILL NO. 699

99TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR SIFTON.

Pre-filed December 1, 2017, and ordered printed.

ADRIANE D. CROUSE, Secretary.

4442S.011

AN ACT

To repeal section 208.146, RSMo, and to enact in lieu thereof one new section relating to the MO HealthNet buy-in for workers with disabilities program.

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

Section A. Section 208.146, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 208.146, to read as follows:

208.146. 1. The program established under this section shall be known as the "[Ticket to Work Health Assurance] **MO HealthNet Buy-In For Workers With Disabilities** Program". Subject to appropriations and in accordance with the federal Ticket to Work and Work Incentives Improvement Act of 1999 (TWWIIA), Public Law 106-170, the medical assistance provided for in section 208.151 may be paid for a person who is employed and who:

(1) Except for earnings, meets the definition of disabled under the Supplemental Security Income Program or meets the definition of an employed individual with a medically improved disability under TWWIIA;

(2) Has earned income, as defined in subsection 2 of this section;

(3) Meets the asset limits in subsection 3 of this section; **and**

(4) Has [net] income, as defined in subsection 3 of this section, that does not exceed [the limit for permanent and totally disabled individuals to receive nonspenddown MO HealthNet under subdivision (24) of subsection 1 of section 208.151; and

(5) Has a gross income of two hundred fifty percent or less of the federal poverty level, excluding any earned income of the worker with a disability between two hundred fifty and three hundred percent of the federal poverty level. For purposes of this subdivision, "gross income" includes all income of the

EXPLANATION—Matter enclosed in bold-faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law.

20 person and the person's spouse that would be considered in determining MO
21 HealthNet eligibility for permanent and totally disabled individuals under
22 subdivision (24) of subsection 1 of section 208.151. Individuals with gross
23 incomes in excess of one hundred percent of the federal poverty level shall pay a
24 premium for participation in accordance with subsection 4 of this section] **three**
25 **hundred percent of the federal poverty level.**

26 2. For income to be considered earned income for purposes of this section,
27 the department of social services shall document that Medicare and Social
28 Security taxes are withheld from such income. Self-employed persons shall
29 provide proof of payment of Medicare and Social Security taxes for income to be
30 considered earned.

31 3. (1) For purposes of determining eligibility under this section, the
32 available asset limit and the definition of available assets shall be [the same as
33 those used to determine MO HealthNet eligibility for permanent and totally
34 disabled individuals under subdivision (24) of subsection 1 of section 208.151
35 except for] **those assets the person owns or resources the person**
36 **possesses not to exceed ten thousand dollars; provided, however, that**
37 **if such person is married and living with his or her spouse, he or she,**
38 **or they, individually or jointly, may own resources not to exceed twenty**
39 **thousand dollars. Beginning in fiscal year 2020 and each successive**
40 **fiscal year thereafter, the MO HealthNet division shall measure the**
41 **cost-of-living percentage increase, if any, as of the preceding July over**
42 **the level as of July of the immediately preceding year of the Consumer**
43 **Price Index for All Urban Consumers or successor index published by**
44 **the U.S. Department of Labor or its successor agency, and the sum of**
45 **resources allowed under this subdivision shall be modified accordingly**
46 **to reflect any increases in the cost-of-living, with the amount of the**
47 **resource limit rounded to the nearest five cents. For the purposes of**
48 **determining eligibility under this section, the following shall be exempt**
49 **from asset limit consideration:**

50 (a) Medical savings accounts limited to deposits of earned income and
51 earnings on such income while a participant in the program created under this
52 section with a value not to exceed five thousand dollars per year; [and]

53 (b) Independent living accounts limited to deposits of earned income and
54 earnings on such income while a participant in the program created under this
55 section with a value not to exceed five thousand dollars per year. For purposes

56 of this section, an "independent living account" means an account established and
57 maintained to provide savings for transportation, housing, home modification, and
58 personal care services and assistive devices associated with such person's
59 disability; **and**

60 **(c) Retirement accounts, including but not limited to, individual**
61 **accounts, 401(k) plans, 403(b) plans, Keogh plans, and pension plans.**

62 (2) To determine [net] income, the following shall be disregarded:

63 (a) [All earned income of the disabled worker;

64 (b)] The first [sixty-five dollars and one-half] **seventy-five thousand**
65 **dollars** of [the remaining] earned income of [a nondisabled spouse's earned
66 income] **the person's spouse;**

67 [(c)] **(b)** A twenty dollar standard deduction;

68 [(d)] **(c)** Health insurance premiums;

69 [(e)] **(d)** A seventy-five dollar a month standard deduction for the
70 disabled worker's dental and optical insurance when the total dental and optical
71 insurance premiums are less than seventy-five dollars;

72 [(f)] **(e)** All Supplemental Security Income payments, and the first fifty
73 dollars of SSDI payments;

74 [(g)] **(f)** A standard deduction for impairment-related employment
75 expenses equal to one-half of the disabled worker's earned income.

76 4. Any person whose [gross] income exceeds one hundred percent of the
77 federal poverty level shall pay a premium for participation in the medical
78 assistance provided in this section. Such premium shall be:

79 (1) For a person whose [gross] income is more than one hundred percent
80 but less than one hundred fifty percent of the federal poverty level, four percent
81 of income at one hundred percent of the federal poverty level;

82 (2) For a person whose [gross] income equals or exceeds one hundred fifty
83 percent but is less than two hundred percent of the federal poverty level, four
84 percent of income at one hundred fifty percent of the federal poverty level;

85 (3) For a person whose [gross] income equals or exceeds two hundred
86 percent but less than two hundred fifty percent of the federal poverty level, five
87 percent of income at two hundred percent of the federal poverty level;

88 (4) For a person whose [gross] income equals or exceeds two hundred fifty
89 percent up to and including three hundred percent of the federal poverty level,
90 six percent of income at two hundred fifty percent of the federal poverty level.

91 5. Recipients of services through this program shall report any change in

92 income or household size within ten days of the occurrence of such change. An
93 increase in premiums resulting from a reported change in income or household
94 size shall be effective with the next premium invoice that is mailed to a person
95 after due process requirements have been met. A decrease in premiums shall be
96 effective the first day of the month immediately following the month in which the
97 change is reported.

98 6. If an eligible person's employer offers employer-sponsored health
99 insurance and the department of social services determines that it is more cost
100 effective, such person shall participate in the employer-sponsored insurance. The
101 department shall pay such person's portion of the premiums, co-payments, and
102 any other costs associated with participation in the employer-sponsored health
103 insurance. **If the department elects to pay such person's employer-**
104 **sponsored insurance costs pursuant to this subsection, then the medical**
105 **assistance provided under this section shall be provided to an eligible**
106 **person as a secondary or supplemental policy to any employer-**
107 **sponsored benefits which may be available to such person.**

108 7. The [provisions of this section shall expire August 28, 2019]
109 **department shall provide to the general assembly an annual report of**
110 **the number of participants in the program, as well as describe the**
111 **outreach and education efforts to increase awareness and enrollment**
112 **in MO HealthNet buy-in for workers with disabilities.**

113 8. **The department shall submit such state plan amendments and**
114 **waivers to the Centers for Medicare and Medicaid Services of the**
115 **federal Department of Health and Human Services as the department**
116 **determines are necessary to implement the provisions of this section.**

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