

SENATE BILL No. 241

By Committee on Public Health and Welfare

2-12

1 AN ACT concerning children and minors; relating to former foster care
2 youth; allowing for state-provided health insurance for children
3 adopted out of foster care; amending K.S.A. 2020 Supp. 38-2001 and
4 repealing the existing section.

5
6 *Be it enacted by the Legislature of the State of Kansas:*

7 New Section 1. (a) The department of health and environment shall
8 contract for one non-profit managed care organization to administer state
9 medicaid services using a capitated managed care delivery system for the
10 following persons, who shall be mandatory enrollees for state medicaid
11 services under such system with such managed care organization:

12 (1) Any child under 18 years of age who was placed away from the
13 child's parents or guardians and for whom the Kansas department for
14 children and families had placement and care responsibility, but who was
15 subsequently adopted pursuant to the revised Kansas code for care of
16 children; and

17 (2) any person between 18 and 22 years of age who was described by
18 paragraph (1) immediately prior to the date the person attained 18 years of
19 age and who is currently attending a public or private postsecondary
20 educational institution, as defined in K.S.A. 74-3201b, and amendments
21 thereto.

22 (b) The department of health and environment shall require that any
23 bidder submitting a bid to provide the services described in subsection (a):

24 (1) Administer state medicaid services using a capitated managed
25 care delivery system to the persons described in subsection (a) beginning
26 on July 1, 2022;

27 (2) have experience administering a system similar to the system
28 described in this section on a statewide basis;

29 (3) provide and coordinate services that promote employment,
30 housing, education, food security, transportation, transition to adulthood
31 and other determinants of health;

32 (4) use a money-follows-the-person model for covered persons
33 receiving state medicaid services;

34 (5) coordinate with the Kansas department for children and families,
35 including, but not limited to, child protective services staff;

36 (6) coordinate with enrollee caregivers;

1 (7) coordinate with the judicial system regarding proceedings under
2 the revised Kansas code for care of children;

3 (8) comply with any requirements imposed by the department of
4 health and environment relating to access to service providers; and

5 (9) implement a policy requiring that, if an enrollee is discharged
6 from a psychiatric residential treatment facility because the managed care
7 organization determines that such treatment is no longer a medical
8 necessity, then the psychiatric residential treatment facility and the
9 managed care organization shall coordinate with interested parties and
10 determine an appropriate placement and services for the enrollee within
11 three business days.

12 (c) The department of health and environment shall issue a request
13 for proposals soliciting bids for the contract described in this section on or
14 before January 1, 2022.

15 (d) The department of health and environment shall submit to the
16 United States centers for medicare and medicaid services any approval
17 request necessary to implement this section.

18 Sec. 2. K.S.A. 2020 Supp. 38-2001 is hereby amended to read as
19 follows: 38-2001. (a) The department of health and environment shall
20 develop and submit a plan consistent with federal guidelines established
21 under section 4901 of public law 105-33-~~4~~, 42 U.S.C. § 1397aa et seq.; title
22 XXI).

23 (b) The plan developed under subsection (a) shall be a capitated
24 managed care plan covering Kansas children from zero to 19 years-~~which~~
25 *of age that:*

26 (1) Contains benefit levels at least equal to those for the early and
27 periodic screening, diagnosis and treatment program;

28 (2) provides for presumptive eligibility for children where applicable;

29 (3) provides continuous eligibility for 12 months once a formal
30 determination is made that a child is eligible subject to subsection (e);

31 (4) has performance based contracting with measurable outcomes
32 indicating age appropriate utilization of plan services to include, but not
33 limited to, such measurable services as immunizations, vision, hearing and
34 dental exams, emergency room utilization, annual physical exams and
35 asthma;

36 (5) shall use the same prior authorization standards and requirements
37 as used for health care services under medicaid to further the goal of
38 seamlessness of coverage between the two programs;

39 (6) shall provide targeted low-income children, as defined under
40 section 4901 of public law 105-33-~~4~~, 42 U.S.C. § 1397aa, et seq.),
41 coverage subject to appropriations;

42 (7) shall provide coverage, subject to appropriation of funds and
43 eligibility requirements, for children-~~residing in a household having a~~

1 ~~gross household income:~~

2 (A) ~~for 2009, at or under 225% of the 2008 federal poverty income~~
3 ~~guidelines and (B) For 2010 and subsequent years,~~*Residing in a*
4 *household having a gross household income* at or under 250% of the 2008
5 federal poverty income guidelines; the participants receiving coverage
6 shall contribute to the payment for such coverage through a sliding-fee
7 scale based upon ability to pay as established by rules and regulations of
8 the secretary of health and environment; *and*

9 (B) *who have had an adoption decree filed with the court following a*
10 *child in need of care case; and*

11 (8) contains a provision ~~which~~ *that* requires the newly enrolled
12 participants with a family income over 200% of the federal poverty
13 income guidelines to wait at least 8 months before participating in this
14 program, if such participants previously had comprehensive health benefit
15 coverage through an individual policy or a health benefit plan provided by
16 any health insurer as defined in K.S.A. 40-4602, and amendments thereto.
17 This waiting period provision shall not apply when the prior coverage
18 ended due to loss of employment other than the voluntary termination,
19 change to a new employer that does not provide an option for dependent
20 coverage, discontinuation of health benefits to all employees, expiration of
21 COBRA coverage period or any other situations where the prior coverage
22 ended due to reasons unrelated to the availability of this program.

23 (c) The secretary of health and environment is authorized to contract
24 with entities authorized to transact health insurance business in this state to
25 implement the health insurance coverage plan pursuant to subsection (a)
26 providing for several plan options to enrollees ~~which~~ *that* are coordinated
27 with federal and state child health care programs, except that when
28 contracting to provide managed mental health care services the secretary
29 of health and environment shall assure that contracted entities demonstrate
30 the ability to provide a full array of mental health services in accordance
31 with the early and periodic screening, diagnosis and treatment plan. The
32 secretary of health and environment shall not develop a request for
33 proposal process ~~which~~ *that* excludes community mental health centers
34 from the opportunity to bid for managed mental health care services.

35 (d) When developing and implementing the plan in subsection (a), the
36 secretary of health and environment to the extent authorized by law:

37 (1) Shall include provisions that encourage contracting insurers to
38 utilize and coordinate with existing community health care institutions and
39 providers;

40 (2) may work with public health care providers and other community
41 resources to provide educational programs promoting healthy lifestyles
42 and appropriate use of the plan's health services;

43 (3) shall plan for outreach and maximum enrollment of eligible

1 children through cooperation with local health departments, schools, child
2 care facilities and other community institutions and providers;

3 (4) shall provide for a simplified enrollment plan;

4 (5) shall provide cost sharing as allowed by law;

5 (6) shall not count the caring program for children, the Kansas health
6 insurance association plan or any charity health care plan as insurance
7 under subsection (e)(1);

8 (7) may provide for payment of health insurance premiums, including
9 contributions to a health savings account if applicable, and, in conjunction
10 with an employer sponsored insurance premium assistance plan, may
11 provide that supplemental benefits be purchased outside of the capitated
12 managed care plan, if it is determined cost effective, taking into account
13 the number of children to be served and the benefits to be provided;

14 (8) may provide that prescription drugs, transportation services and
15 dental services are purchased outside of the capitated managed care plan to
16 improve the efficiency, accessibility and effectiveness of the program; and

17 (9) shall include a provision that requires any individual to be a
18 citizen or an alien lawfully admitted to the United States for purposes of
19 establishing eligibility for benefits under the plan and to present
20 satisfactory documentary evidence of citizenship or lawful admission of
21 the individual. The criteria for determining whether the documentation is
22 satisfactory shall be no more restrictive than the criteria used by the social
23 security administration to determine citizenship. A document issued by a
24 federally-recognized Indian tribe evidencing membership or enrollment in,
25 or affiliation with, such tribe, such as a tribal enrollment card or certificate
26 of degree of Indian blood shall be satisfactory documentary evidence of
27 citizenship or lawful admission.

28 (e) A child shall not be eligible for coverage and shall lose coverage
29 under the plan developed under ~~subsection (a) of K.S.A. 38-2001(a)~~, and
30 amendments thereto, if such child's family has not paid the enrollee's
31 applicable share of any premium due.

32 If the family pays all of the delinquent premiums owed during the year,
33 such child will again be eligible for coverage for the remaining months of
34 the continuous eligibility period.

35 (f) The plan developed under section 4901 of public law 105-33 ~~42~~
36 U.S.C. § 1397aa et seq., ~~and amendments thereto~~ is not an entitlement
37 program. The availability of the plan benefits shall be subject to funds
38 appropriated. The secretary of health and environment shall not utilize
39 waiting lists, but shall monitor costs of the program and make necessary
40 adjustments to stay within the program's appropriations.

41 (g) Eligibility and benefits under the plan prescribed by subsection
42 (b)(7) are not and shall not be construed to be entitlements, are for legal
43 residents of the state of Kansas and are subject to availability of state and

1 federal funds and to any state and federal requirements and the provisions
2 of appropriation acts. If the secretary of health and environment
3 determines that the available federal funds and the state funds appropriated
4 are insufficient to sustain coverage for the income eligibility levels
5 prescribed by subsection (b)(7), a lower income level shall be adopted and
6 implemented by the secretary of health and environment, within the limits
7 of appropriations available therefor, and all such changes shall be
8 published by the secretary of health and environment in the Kansas
9 register.

10 Sec. 3. K.S.A. 2020 Supp. 38-2001 is hereby repealed.

11 Sec. 4. This act shall take effect and be in force from and after its
12 publication in the statute book.