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## **OLR Bill Analysis**

**HB 6687**

### ***Emergency Certification***

## ***AN ACT CONCERNING MEDICAL ASSISTANCE FOR CHILDREN AND ADULTS WITHOUT HEALTH CARE COVERAGE.***

### **SUMMARY**

This bill requires the Department of Social Services (DSS) to extend eligibility for medical assistance, subject to income limits and within available appropriations, to certain groups of people without legal immigration status or regardless of immigration status. The bill extends this coverage to (1) children under age 9 and (2) women for 12 months after giving birth.

The bill also requires the DSS commissioner to amend the Children's Health Insurance Program (CHIP) state plan to provide medical assistance for prenatal care through the "unborn child option." This is a state option that allows states to consider an unborn child a low-income child eligible for prenatal care coverage if other CHIP eligibility requirements are met.

The bill additionally requires the DSS commissioner to develop four-year plans to phase in medical assistance for (1) income-eligible children ages 9 to 18, regardless of immigration status and (2) adults with household income up to 200% of the federal poverty level (FPL) who do not currently qualify for medical assistance due to household income. The commissioner must report on the plans to the Appropriations, Human Services, and Insurance and Real Estate committees by January 1, 2022.

**EFFECTIVE DATE:** January 1, 2022, except that the requirement to extend medical assistance to children under age 9 is effective October 1, 2021, and the provisions on four-year plans are effective upon passage.

**§§ 1 & 3 — CHILDREN UNDER AGE 9**

The bill requires the DSS commissioner, beginning January 1, 2022, to provide medical assistance, within available appropriations, to children under age 9, regardless of immigration status, with household incomes (1) up to 201% of FPL with no asset limit and (2) over 201% of FPL and up to 323% of FPL.

**§ 2 — POSTPARTUM CARE FOR WOMEN**

The bill requires the DSS commissioner, on or after April 1, 2022, to provide medical assistance, within available appropriations, for postpartum care to women for 12 months after birth who (1) do not have legal immigration status and (2) have household incomes up to 263% of FPL.

**§ 4 — UNBORN CHILD OPTION FOR PRENATAL CARE**

The bill requires the DSS commissioner to amend the CHIP state plan to provide medical assistance for prenatal care through the “unborn child option.” This is a state option that allows states to consider an unborn child a low-income child eligible for coverage of prenatal care if other CHIP eligibility requirements are met. According to the federal Centers for Medicare and Medicaid Services, the requirement to meet other CHIP eligibility criteria applies to the child and not the mother.

The commissioner must provide medical assistance for prenatal care through this option by April 1, 2022. CHIP is jointly funded by the state and federal government and is administered by DSS according to federal requirements. The state provides CHIP coverage under HUSKY B, which covers children in families with household incomes between 196% and 318% of the federal poverty limit.

**§ 5 — PLANS TO EXTEND MEDICAL ASSISTANCE**

The bill requires the DSS commissioner to develop four-year plans to phase in medical assistance for the following two groups:

1. income-eligible children, ages 9 to 18, regardless of immigration status; and

2. adults with household income up to 200% of FPL who do not currently qualify for medical assistance due to household income.

The bill requires the DSS commissioner to (1) consult with the Office of Health Strategy and the Connecticut Health Insurance Exchange to develop the plans and (2) by January 1, 2022, report on the plans' provisions to the Appropriations, Insurance and Real Estate, and Human Services committees.

The bill requires the plan for expanding medical assistance to income-eligible children ages 9 to 18 to include the following information:

1. the age groups that would receive medical assistance in each fiscal year starting with FY 23, and necessary appropriations to provide this assistance;
2. income eligibility criteria and health care coverage consistent with medical assistance the state provides under Medicaid and CHIP; and
3. recommendations for identifying and enrolling eligible children.

The plan for expanding medical assistance coverage for adults with household income up to 200% of FPL must include the following information:

1. household income caps for those who would receive medical assistance in each year starting in FY 23, and necessary appropriations to provide this assistance;
2. health care coverage consistent with medical assistance the state provides under Medicaid generally and HUSKY D specifically; and
3. recommendations for identifying and enrolling eligible adults.

## BACKGROUND

### *Related Bills*

sSB 910 (File 130), favorably reported by the Appropriations and Human Services committees, requires DSS to extend Medicaid coverage for postpartum care to 12 months after a mother gives birth.

sSB 911 (File 115), favorably reported by the Human Services Committee, requires DSS to amend the CHIP plan to provide medical assistance for prenatal care through the unborn child option.

SB 956 (File 516), favorably reported by the Appropriations and Human Services committees, requires DSS to provide medical assistance, within available appropriations, to people regardless of their immigration status, as long as they otherwise meet income eligibility guidelines.

### *Federal Poverty Level*

The U.S. Department of Health and Human Services establishes the FPL (“federal poverty level”) annually. Table 1 shows the number of people in a household and the annual FPL amounts for 2021 at various percentages, rounded to the nearest dollar.

**Table 1: FPL Amounts at Various Percentages**

<b>Number of People in Household</b>	<b>100%</b>	<b>200%</b>	<b>201%</b>	<b>263%</b>	<b>323%</b>
1	\$12,880	\$25,760	\$25,889	\$33,874	\$41,602
2	\$17,420	\$34,840	\$35,014	\$45,815	\$56,267
3	\$21,960	\$43,920	\$44,140	\$57,755	\$70,931