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HOUSE JOINT RESOLUTION NO. 286

Offered January 24, 2000

Requesting the Department of Medical Assistance Services and the Department of Mental Health, Mental Retardation and Substance Abuse Services to study the feasibility of adopting the Medicaid "buy-in" option for people with disabilities whose earned income does not exceed 250 percent of the federal poverty guidelines.

Patrons—Grayson, Bloxom, Christian, DeBoer, Hall, Morgan, Thomas and Weatherholtz; Senators: Hanger and Wampler

Referred to Committee on Rules

WHEREAS, Medicaid is an important source of health insurance for low-income aged, blind, and disabled people; and

WHEREAS, these groups of people often face barriers to private insurance coverage because they tend to require more health care and often more expensive types of care than other groups; and

WHEREAS, federal law requires that Medicaid programs cover certain aged, blind, and disabled persons, but states also have a variety of eligibility options; and

WHEREAS, lack of Medicaid coverage can impose substantial financial burdens on low income aged, blind, and disabled persons; and

WHEREAS, provisions of the federal Balanced Budget Act of 1997 and the Work Incentives Improvement Act of 1999 allow states to offer Medicaid "buy-in" options to workers with disabilities who would qualify for Medicaid if their incomes were not too high; and

WHEREAS, under the provisions of the federal law these workers would pay a premium based on a sliding scale, which would encourage work by allowing disabled individuals to earn more income while retaining Medicaid coverage; and

WHEREAS, encouraging work is consistent with the goal contained in the Governor's Strategic Plan, "Building Virginia's Future: A Time for All Virginians," to "continue Virginia's efforts to promote self-sufficiency for its citizens"; and

WHEREAS, the Joint Subcommittee to Evaluate the Future Delivery of Publicly Funded Mental Health, Mental Retardation and Substance Abuse Services (HJR 225 of 1998) recommended consideration of the Medicaid "buy-in" option to improve access to care by people with disabilities who are able to work and whose incomes do not exceed 250 percent of the federal poverty level; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Department of Medical Assistance Services and the Department of Mental Health, Mental Retardation and Substance Abuse Services study the feasibility of adopting the Medicaid "buy-in" option for people with disabilities whose earned income does not exceed 250 percent of the federal poverty guidelines. The study shall include an analysis of the costs and benefits of adopting the option, including an estimate of the number of people who might be helped to achieve self-sufficiency with this option, the cost to the Commonwealth, and the savings in other programs. The study shall also include a proposed plan for implementation, including the amount of individual premiums, the sliding payment scale, and an outreach program.

All agencies of the Commonwealth shall provide assistance to the Department of Medical Assistance Services and the Department of Mental Health, Mental Retardation and Substance Abuse Services for this study, upon request.

The Department of Medical Assistance Services and the Department of Mental Health, Mental Retardation and Substance Abuse Services shall complete their work in time to submit their findings and recommendations to the Governor and the 2001 Session of the General Assembly as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents.

INTRODUCED

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