HOUSE COMMITTEE AMENDMENTS

Amendments proposed by House Committee on Health and Welfare to Original House Concurrent Resolution No. 8 by Representative Edwards

1 AMENDMENT NO. 1

- On page 5, at the end of line 3, insert a semicolon ";" and "Louisiana Health Care
 Independence Program"
- 4 AMENDMENT NO. 2
- 5 On page 5, between lines 12 and 13, insert the following:

| 6 | "B. The department shall create and administer the Louisiana Health Care |
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| 7 | Independence Program, referred to hereafter in this Section as the "program". After |
| 8 | receiving the approval of the Senate and House Committees on Health and Welfare, |
| 9 | the department, on or before September 1, 2013, shall submit and apply for all of the |
| 10 | following: |
| 11 | 1. Federal waivers necessary to implement the program in a manner |
| 12 | consistent with this Section, including without limitation approval for a |
| 13 | comprehensive waiver under Section 1115 of the Social Security Act, 42 U.S.C. |
| 14 | <u>1315.</u> |
| 15 | 2. Medicaid state plan amendments necessary to implement the program in |
| 16 | a manner consistent with this Section. |
| 17 | 3. Those Medicaid state plan amendments that are optional and therefore |
| 18 | may be revoked by the state at its discretion. |
| 19 | C.1. As part of its actions the department shall confirm that employers shall |
| 20 | not be subject to the penalties, including without limitation an assessable payment, |
| 21 | under Section 1513 of Pub. L. No. 111-148, as existing on January 1, 2013, |
| 22 | concerning shared responsibility, for employees who are eligible individuals if the |
| 23 | employees meet either of the following criteria: |
| 24 | (a) Are enrolled in the program. |
| 25 | (b) Enroll in a qualified health plan through the federal health insurance |
| 26 | <u>marketplace.</u> |
| 27 | 2. If the department is unable to confirm provisions under this Section, the |
| 28 | program shall not be implemented. |
| 29 | D.1. Implementation of the program shall be contingent upon the receipt of |
| 30 | necessary federal approvals. |
| 31 | 2. If the department does not receive the necessary federal approvals, the |
| 32 | program shall not be implemented. |
| 33 | E. The program shall include premium assistance for eligible individuals to |
| 34 | enable their enrollment in a qualified health plan through the federal health insurance |
| 35 | marketplace. |
| 36 | F.1. The department may pay premiums and supplemental cost-sharing |
| 37 | subsidies directly to the federally qualified health plans for enrolled eligible |
| 38 | individuals. |
| 39 | 2. The intent of the payments under this Subsection is to increase |
| 40 | participation in the health insurance market, intensify price pressures, and reduce |
| 41 | costs for both publicly and privately funded health care. |
| 42 | G. The department shall accomplish all of the following to the extent |
| 43 | allowable by law: |
| | |

| 1 | 1. Pursue strategies that promote insurance coverage of children in their |
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| 2 | parents' or caregivers' plan, including children eligible for the Louisiana Children's |
| 3 | Health Insurance Program (LaCHIP). |
| 4 | 2. Develop and implement a strategy to inform Medicaid recipient |
| 5 | populations whose needs would be reduced or better served through participation in |
| 6 | the federal health insurance marketplace. |
| | |
| 7 | H. The program authorized by this Section shall terminate within one |
| 8 | hundred twenty days after a reduction in any of the following federal medical |
| 9 | assistance percentages for services to individuals determined eligible under the new |
| 10 | adult group and who are considered to be newly eligible as defined in section |
| 11 | <u>1905(y)(2)(A) of the Patient Protection and Affordable Care Act:</u> |
| 12 | <u>1. One hundred percent in 2014, 2015, or 2016.</u> |
| 13 | 2. Ninety-five percent in 2017. |
| 14 | 3. Ninety-four percent in 2018. |
| 15 | 4. Ninety-three percent in 2019. |
| 16 | 5. Ninety percent in 2020 or any year after 2020. |
| . – | |
| 17 | I. An eligible individual enrolled in the program shall affirmatively |
| 18 | acknowledge the existence of all of the following facts: |
| 19 | 1. The program shall not be a perpetual federal or state right or a guaranteed |
| 20 | entitlement. |
| 21 | 2. The program shall be subject to cancellation upon appropriate notice. |
| 22 | 3. The program shall not be an entitlement program. |
| 23 | I.1. The department shall devial on a model and easy from the Conteres for |
| 23 24 | J.1. The department shall develop a model and seek from the Centers for Medicare and Medicaid Services all necessary waivers and approvals to allow |
| 24 25 | <u>non-aged, non-disabled program-eligible participants to enroll in a program that shall</u> |
| 23 26 | create and utilize independence accounts that operate similar to a health savings |
| 20 27 | account or medical savings account during the calendar year 2015. |
| 28 | <u>2. The independence accounts shall accomplish all of the following</u> |
| 29 | functions: |
| 30 | (a) Allow a participant to purchase cost-effective high-deductible health |
| 31 | insurance. |
| 32 | (b) Promote independence and self-sufficiency. |
| 33 | 3. The state shall implement cost sharing and copayments, and establish as |
| 34 | a condition of participation that earnings shall exceed fifty percent of the applicable |
| 35 | federal poverty level. |
| 36 | 4. Participants may receive rewards based on healthy living and |
| 37 | self-sufficiency. |
| 38 | 5.(a) At the end of each fiscal year, if there are funds remaining in the |
| 39 | account, a majority of the state's contribution shall remain in the participant's control |
| 40 | as a positive incentive for the responsible use of the health care system and personal |
| 41 | responsibility of health maintenance. |
| 42 | (b) Uses of the funds may include, without limitation, rolling the funds into |
| 43 | a private sector health savings account for the participant according to rules |
| 44 | promulgated by the department. |
| 45 | (c) The department shall promulgate any additional rules necessary to |
| 46 | implement this Section in accordance with the Administrative Procedure Act, and |
| 47 | shall project, track, and report state obligations for uncompensated care to identify |
| 48 | potential incremental future decreases. |
| 49 | (d) The department shall recommend appropriate adjustments in funding to |
| 50 | the legislature. |
| 51 | (e) Adjustments shall be made by the legislature as appropriate. |
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| 52 | K. On a quarterly basis, the department shall report to the Joint Legislative |
| 53 | Committee on the Budget, within two weeks of the end of each quarter, information |
| 54 | regarding the following aspects of the program: |
| 55 | <u>1. Program enrollment.</u> |

- 12. Patient experience.23. Economic impact in
 - 3. Economic impact including enrollment distribution.
 - 4. Carrier competition.
 - 5. Success in avoiding uncompensated care."
- 5 <u>AMENDMENT NO. 3</u>

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- 6 On page 5, at the beginning of line 13, change "<u>B.</u>" to "<u>L.</u>"
- 7 AMENDMENT NO. 4
- 8 On page 5, at the beginning of line 23, change "<u>C.</u>" to "<u>M.</u>"
- 9 AMENDMENT NO. 5
- 10 On page 6, at the beginning of line 5, change "<u>D.</u>" to "<u>N.</u>"
- 11 <u>AMENDMENT NO. 6</u>
- 12 On page 6, at the beginning of line 10, change "<u>E.</u>" to "<u>O.</u>"