LC001979

2023 -- S 0717

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2023

AN ACT

RELATING TO HUMAN SERVICES -- HEALTHCARE ASSISTANCE FOR WORKING PEOPLE WITH DISABILITIES

Introduced By: Senators Valverde, DiMario, Miller, Murray, Quezada, Lauria, Ujifusa, Gu, and Kallman Date Introduced: March 22, 2023

Referred To: Senate Finance

It is enacted by the General Assembly as follows:

- 1 SECTION 1. Section 40-8.7-6 of the General Laws in Chapter 40-8.7 entitled "Healthcare
- 2 Assistance for Working People with Disabilities" is hereby amended to read as follows:
- 3 **40-8.7-6.** Eligibility.
- 4 (a) To be eligible for benefits under the Medicaid buy-in program:
- 5 (1) The person shall be an individual with disabilities as defined in § 40-8.7-4, but without

6 regard to his or her ability to engage in substantial gainful activity, as specified in the Social

7 Security Act, 42 U.S.C. § 423(d)(4);

8 (2) The person shall be employed as defined in § 40-8.7-4;

9 (3) The person's net accountable income shall not exceed two hundred fifty percent (250%)

10 of the federal poverty level, taking into account the SSI program disregards and impairment related

- 11 work expenses as defined in 42 U.S.C. § 1396a(r)(2);
- 12 (4) A maximum of ten thousand dollars (\$10,000) of available resources for an individual

13 and twenty thousand dollars (\$20,000) for a couple shall be disregarded as shall any additional

- 14 resources held in a retirement account, in a medical savings account, or any other account, related
- 15 to enhancing the independence of the individual and approved under rules to be adopted by the
- 16 department; and
- 17 (5) The person shall be a current medical assistance recipient under § 40 8.5 1 [CNIL] or
 18 § 40 8 3(5)(v) [MNIL]; or shall meet income, assets, (except as modified by subsection (a)(4) of

1 this section) and eligibility requirements for the medical assistance program under § 40-8.5-1

[CNIL] or § 40-8-3(5)(v) [MNIL], as such requirements are modified and extended by this chapter.

(b) Appeals Process. The director or designee shall review each application filed in accordance with regulations, and shall make a determination of whether the application will be approved and the extent of the benefits to be made available to the applicant, and shall, within thirty (30) days after the filing, notify the applicant, in writing, of the determination. If the application is rejected, the applicant shall be notified the reason for the denial. The director may at any time reconsider any determination. Any applicant for or recipient of benefits aggrieved because of a

9 decision, or delay in making a decision, shall be entitled to an appeal and shall be afforded
10 reasonable notice and opportunity for a fair hearing conducted by the director, pursuant to chapter
11 8 of this title.

SECTION 2. Section 40-8-3 of the General Laws in Chapter 40-8 entitled "Medical
Assistance" is hereby amended to read as follows:

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40-8-3. Eligibility requirements.

15 Medical care benefits shall be provided under this chapter to at least any person:

16 (1) Who has attained the age of sixty-five (65) years; or

(2) Who has no vision or whose vision is so defective as to prevent performance of ordinaryactivities for which eyesight is essential; or

(3) Who is at least eighteen (18) years of age and who is permanently and totally disabled;
or

(4) Who is under the age of eighteen (18) years, and who has been deprived of parental support or care by reason of the death, continued absence from the home, unemployment, or physical or mental incapacity of a parent (called hereafter "dependent child") and who is living with a relative in a place of residence maintained by one or more of these relatives as his or her or their own home, or is in foster boarding care; or

26 (5) The relative as defined in subsection (8) of § 40-8-2, with whom the dependent child is

27 living; provided the person:

28 (i) Is a resident of this state; and

29 (ii) Is not receiving public assistance under the provisions of § 40-5.1-9(b) [repealed] or §
30 40-6-27; and

31 (iii) Is not an inmate of a public institution other than as a patient in a medical institution;32 and

(iv) Is not a patient in an institution for tuberculosis or mental disease, unless the person
has attained the age of sixty-five (65) years; provided, however, that this clause shall become void

1 and of no effect if and when legislation enacted by the Congress of the United States shall become 2 effective providing for payments for medical care on behalf of persons who have not attained the 3 age of sixty-five (65) years who are patients in an institution for tuberculosis or mental disease; and 4 (v) Has insufficient income and resources. The department shall establish income and 5 resource rules, regulations, and limits in accordance with Title XIX of the federal Social Security Act, 42 U.S.C. § 1396 et seq., as applicable to the medically needy only applicants and recipients. 6 7 The income limits established by the department must be more than the AFDC standard in effect 8 on July 16, 1996, under the Rhode Island state plan approved under part A of Title IV of the federal 9 Social Security Act, 42 U.S.C. § 601 et seq., but shall not be more than one hundred thirty-three 10 and one-third percent (133¹/₃%) of the AFDC standard in effect on July 16, 1996, under the Rhode 11 Island state plan approved under part A of Title IV of the federal Social Security Act; provide d, 12 however, that subject to the maximum percentage increase allowable under 1931(b)(2)(B), the 13 department shall increase the income limits on July 1, 1999, by six and six-tenths percent (6.6%), 14 and on January 1, of each year commencing in the year 2000 by a percentage equal to the annual 15 federal adjustment percentage as determined under the provisions of Title XVI of the federal Social 16 Security Act, 42 U.S.C. § 1381 et seq. The department shall establish resource limits equal to two 17 thousand dollars (\$2,000) for an individual and three thousand dollars (\$3,000) for a family. 18 Provided, however, the department shall apply to the United States Department of Health and 19 Human Services for a waiver relating to application of the reduced resource limit, and subject to 20 the granting of the waiver by the Secretary of the United States Department of Health and Human 21 Services, the resource limit shall be applied to all applicants who: (A) Become eligible for benefits 22 under this chapter on or after the effective date of this amendment and (B) Who were not receiving 23 benefits under this chapter prior to July 1, 1993. In the event the secretary does not approve the 24 waiver request, the current department regulations relating to resource limits shall remain in effect 25 for all eligible beneficiaries. Provided, however, on and after July 1, 2023, eligible recipients shall 26 not be subject to individual or family resource limits.

For the purposes of this subsection, a vehicle necessary to transport a family member with a disability, where the vehicle is specially equipped to meet the specific needs of the person with a disability or if the vehicle is a special type of vehicle that makes it possible to transport the person with the disability, shall not be counted as resources of the applicants and recipients.

31 SECTION 3. This act shall take effect upon passage.

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EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

A N A C T

RELATING TO HUMAN SERVICES -- HEALTHCARE ASSISTANCE FOR WORKING PEOPLE WITH DISABILITIES

1	This act would remove the requirement that a person's net accountable income does not
2	exceed two hundred fifty percent (250%) of the federal poverty level and that an individual
3	maintain a maximum of ten thousand dollars (\$10,000) for an individual and twenty thousand
4	dollars (\$20,000) for a couple, in order to qualify for the Medicaid buy-in program. This act would
5	further provide that as of July 1, 2023, eligible recipients would not be subject to individual or
6	family resource limits in order to qualify for Medicaid.
7	This act would take effect upon passage.

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