GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2019

H.B. 1104 May 14, 2020 HOUSE PRINCIPAL CLERK

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HOUSE BILL DRH30561-MRa-136

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Short Title: Access to Affordable Health Coverage for All. (Public)

Sponsors: Representative Brockman.

Referred to:

A BILL TO BE ENTITLED

AN ACT TO CREATE ACCESS TO AFFORDABLE HEALTH INSURANCE THROUGH THE FEDERAL HEALTH BENEFITS EXCHANGE FOR INDIVIDUALS IN THE COVERAGE GAP.

The General Assembly of North Carolina enacts:

SECTION 1. It is the intent of the General Assembly to create a mechanism for the State to provide a refundable premium tax credit that is (i) designed to help eligible individuals who fall into what has become known as the "coverage gap" afford health insurance purchased through the federal Health Insurance Marketplace, or the Health Benefits Exchange (Exchange), and (ii) modeled after the federal refundable premium tax credit for purchasing health insurance on the Exchange, as provided for under the Patient Protection and Affordable Care Act, P.L. 111-148, as amended. To be considered part of the coverage gap and eligible for this State premium tax credit, a State resident shall meet all the following minimum requirements:

- (1) The individual has a modified adjusted gross income that is below one hundred percent (100%) of the federal poverty level.
- (2) The individual is at least 19 years old and under age 65.
- (3) The individual is not entitled to or enrolled in Medicare benefits under Part A or Part B of Title XVIII of the federal Social Security Act.
- (4) The individual is not eligible for Medicaid coverage or NC Health Choice coverage under the North Carolina State Plan that provides minimum essential coverage, as determined under federal law.
- (5) The individual is not eligible for coverage under TRICARE.
- (6) The individual is not able to obtain affordable coverage through an eligible employer-sponsored plan that provides minimum value and minimum essential coverage, as determined under federal law.

SECTION 2.(a) The Secretary of the Department of Health and Human Services and the Secretary of the Department of Revenue are directed to collaborate and design a program to implement the State premium tax credit described in Section 1 of this act that does both of the following:

- (1) Estimates the amount of State premium tax credit that an individual will be eligible for in a given tax year.
- (2) Allows an individual to direct any amount of the estimated State premium tax credit be paid in advance directly to an insurance company offering health benefit plans in this State on the Exchange.

SECTION 2.(b) No later than March 1, 2021, the Secretary of the Department of Health and Human Services and the Secretary of the Department of Revenue shall submit to the



dollars (\$1,000,000,000).

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SECTION 4. This act is effective when it becomes law.

tax credit described in Section 1 of this act and as required under Section 2 of this act.

General Assembly a report outlining the program to implement the State premium tax credit

described in Section 1 of this act. The report shall contain any recommendations, including

additional eligibility requirements, any legislative changes that would be required to implement

the State premium tax credit, and an estimate of the costs associated with administration of the

program as well as costs to the State associated with offering the premium tax credit. It is the

intent of the General Assembly that the total cost of the program does not exceed one billion

Health and Human Services the sum of one hundred thousand dollars (\$100,000) in nonrecurring

funds for the 2020-2021 fiscal year for the purposes of designing the program to implement the

State premium tax credit described in Section 1 of this act and as required under Section 2 of this

Revenue the sum of one hundred thousand dollars (\$100,000) in nonrecurring funds for the 2020-2021 fiscal year for the purposes of designing the program to implement the State premium

SECTION 3.(a) There is appropriated from the General Fund to the Department of

SECTION 3.(b) There is appropriated from the General Fund to the Department of

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