GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2019

S SENATE BILL 834

Short Title:	Close the Medicaid Coverage Gap/Funds.	(Public)
Sponsors:	Senators Robinson, Foushee, and Blue (Primary Sponsors).	
Referred to:	Rules and Operations of the Senate	

May 27, 2020

A BILL TO BE ENTITLED

AN ACT TO CLOSE THE MEDICAID COVERAGE GAP FOR FAMILIES AND INDIVIDUALS IN NORTH CAROLINA.

The General Assembly of North Carolina enacts:

 SECTION 1. Repeal of Prohibition on Closing the Coverage Gap. – Section 3 of S.L. 2013-5 is repealed.

SECTION 2.(a) Article 2 of Chapter 108A of the General Statutes is amended by adding a new section to read:

"§ 108A-54.3B. Benefits provided to qualified individuals in the Medicaid coverage gap.

- (a) Individuals shall be considered part of the Medicaid coverage gap and eligible for Medicaid benefits under this section if all the following requirements are met:
 - (1) The individual has a modified adjusted gross income that is at or below one hundred thirty-three percent (133%) of the federal poverty level.
 - (2) The individual is age 19 or older 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 otherwise eligible for Medicaid coverage under the North Carolina State Plan as it existed on January 1, 2020.
- (b) Beneficiaries eligible for the Medicaid program under this section shall receive benefits through an Alternative Benefit Plan that is established by the Department consistent with federal requirements, unless that beneficiary is exempt from mandatory enrollment in an Alternative Benefit Plan under 42 C.F.R. § 440.315.
- (c) <u>Co-payments for benefits provided under the Alternative Benefit Plan required by subsection (b) of this section shall be the same as co-payments required for Medicaid beneficiaries not under the Alternative Benefit Plan."</u>

SECTION 2.(b) The Department of Health and Human Services is directed to provide coverage for individuals who are eligible for Medicaid benefits under G.S. 108A-54.3B in a manner consistent with S.L. 2015-245, as amended.

SECTION 2.(c) This section is effective on the date that capitated coverage as required under S.L. 2015-245, as amended, begins. The Secretary of the Department of Health and Human Services shall report to the Revisor of Statutes when the provision of this capitated coverage has commenced.

SECTION 3. Medicaid Coverage Gap Assessment. – Consistent with Section 9 of S.L. 2015-245, as amended by Section 2(e) of S.L. 2016-121, and with Section 9(a) of S.L. 2018-49, it is the intent of the General Assembly to enact legislation during the 2020 Regular Session of the 2019 General Assembly that will replace the Hospital Provider Assessment Act in



Article 7 of Chapter 108A of the General Statutes with a similar hospital provider assessment. In developing this similar hospital provider assessment, it is the intent of the General Assembly to further impose upon these same hospital providers a Medicaid Coverage Gap Assessment that will pay for the State share of the program and administrative costs associated with Medicaid expansion.

5 6 7

SECTION 4. The sum of one hundred thousand dollars (\$100,000) in nonrecurring funds for the 2020-2021 fiscal year is appropriated from the General Fund to the Department of Health and Human Services, Division of Health Benefits, for planning and preparation related to implementation of the Medicaid coverage in this act.

8 9

10

11

law.

SECTION 5. Except as otherwise provided, this bill is effective when it becomes