

Fiscal Estimate - 2019 Session

Original
 Updated
 Corrected
 Supplemental

| | |
|-----------------------------|-----------------------------------|
| LRB Number 19-3621/1 | Introduction Number SB-324 |
|-----------------------------|-----------------------------------|

Description
 extension of eligibility under the Medical Assistance program for post-partum women

Fiscal Effect

State:

| | | |
|--|---|---|
| <input type="checkbox"/> No State Fiscal Effect | <input type="checkbox"/> Increase Existing Revenues | <input checked="" type="checkbox"/> Increase Costs - May be possible to absorb within agency's budget |
| <input type="checkbox"/> Indeterminate | <input type="checkbox"/> Decrease Existing Revenues | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <input checked="" type="checkbox"/> Increase Existing Appropriations | | <input type="checkbox"/> Decrease Costs |
| <input type="checkbox"/> Decrease Existing Appropriations | | |
| <input type="checkbox"/> Create New Appropriations | | |

Local:

| | | |
|--|--|--|
| <input type="checkbox"/> No Local Government Costs | 5. Types of Local Government Units Affected | |
| <input type="checkbox"/> Indeterminate | <input type="checkbox"/> Towns <input type="checkbox"/> Village <input type="checkbox"/> Cities <input type="checkbox"/> Counties <input type="checkbox"/> Others 0 <input type="checkbox"/> School Districts <input type="checkbox"/> WTCS Districts | |
| 1. <input type="checkbox"/> Increase Costs | 3. <input type="checkbox"/> Increase Revenue | |
| <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory | <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory | |
| 2. <input type="checkbox"/> Decrease Costs | 4. <input type="checkbox"/> Decrease Revenue | |
| <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory | <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory | |

| | |
|--|---------------------------------------|
| Fund Sources Affected | Affected Ch. 20 Appropriations |
| <input checked="" type="checkbox"/> GPR <input checked="" type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEGS | |

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|---|---|--------------------------|
| Agency/Prepared By DHS/ Andrew Walsh (608) 266-5655 | Authorized Signature Andy Forsaith (608) 266-7684 | Date 8/14/2019 |
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Fiscal Estimate Narratives

DHS 8/14/2019

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|---|-----------|---------------------|--------|---------------|----------|
| LRB Number | 19-3621/1 | Introduction Number | SB-324 | Estimate Type | Original |
| Description extension of eligibility under the Medical Assistance program for post-partum women | | | | | |

Assumptions Used in Arriving at Fiscal Estimate

Currently, both state and federal law prescribe the post-partum Medicaid eligibility period to extend from the last day of pregnancy to the last day of the month in which the 60th day after the last day of the pregnancy occurs.

Under current policy, Medicaid members enrolled as pregnant women who have reached the end of the current post-partum eligibility period and have a household income below 100 percent of the federal poverty level retain their Medicaid eligibility under the Parent and Caretaker eligibility category. Medicaid members enrolled as pregnant women who have reached the end of their post-partum eligibility period and have a household income above 100 percent of the federal poverty level cease to be eligible for Medicaid.

This bill would extend this post-partum eligibility period to the end of the month in which the 365th day after the last day of the pregnancy occurs. In order to implement the provisions in this bill, the Department would need to request and receive approval for a waiver of federal law.

In June 2018, approximately 6,327 pregnant women with household incomes above 100 percent of the federal poverty level were enrolled in Medicaid. Under this bill, these are the members who would retain their Medicaid eligibility for an additional 10 months post-partum. The costs for services provided to the members who would retain eligibility under this bill are around \$357 per member, per month. The total all-funds cost would be approximately \$22.6 million per year (\$9.0 million GPR and \$13.5 million FED). To the extent that this policy would result in a phase-in of member enrollment, costs would also phase in, beginning with the effective date of the policy and continuing for ten months.

Long-Range Fiscal Implications