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2001 ASSEMBLY BILL 921

March 14, 2002 - Introduced by Representative Black. Referred to Committee on Health.

AN ACT to renumber and amend 49.665 (1) (c); to amend 20.435 (4) (bc), 20.435 (4) (jz), 20.435 (4) (o), 20.435 (4) (p), 49.665 (3), 49.665 (5) (a), 49.665 (5) (b) and 49.665 (5) (c); and to create 20.435 (4) (bd), 49.665 (1) (c) 2. and 49.665 (4) (ag) of the statutes; relating to: health care for low-income child care workers under the badger care health care program, granting rule-making authority, and making appropriations.

Analysis by the Legislative Reference Bureau

Under current law, the badger care health care (BadgerCare) program provides partially or wholly subsidized health care coverage to eligible families and children. Currently, a family or child who does not reside with his or her parent may be eligible for health care coverage under the BadgerCare program if the family's or child's income does not exceed 185% of the federal poverty line and the family or child meets certain nonfinancial criteria. Current law defines "family" as at least one dependent child and his or her custodial parent or parents, all of whom reside in the same household.

This bill expands the BadgerCare program to provide health care to individuals who are child care workers who meet the current law income and nonfinancial eligibility requirements. Under the bill, child care workers are not required to be parents to qualify for health care coverage.

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1	Section 1. 20.435 (4) (bc) of the statutes is amended to read:
2	20.435 (4) (bc) Health care for low-income families and children. As a
3	continuing appropriation, the amounts in the schedule for the badger care to provide
4	health care program for to low-income families <u>and children</u> under <u>the badger care</u>
5	<u>health care program under</u> s. 49.665.
6	Section 2. 20.435 (4) (bd) of the statutes is created to read:
7	$20.435(4)(\mathrm{bd})$ Health care for low-income child care workers. A sum sufficient
8	to provide health care to low-income child care workers under the badger care health
9	care program under s. 49.665.
10	Section 3. 20.435 (4) (jz) of the statutes is amended to read:
11	20.435 (4) (jz) Badger care premiums. All moneys received from payments
12	under s. $49.665(5)$ to be used for the badger care health care program for low–income
13	families under s. 49.665.
14	Section 4. 20.435 (4) (o) of the statutes is amended to read:
15	20.435 (4) (o) Federal aid; medical assistance. All federal moneys received for
16	meeting costs of medical assistance administered under ss. $49.284~(5)_{7}$ and $49.45~and$
17	to the extent permitted under federal law, s. 49.665, to be used for those purposes.
18	Section 5. 20.435 (4) (p) of the statutes is amended to read:
19	20.435 (4) (p) Federal aid; health care for low-income families and children.
20	All federal moneys received for the badger care health care program for low-income
21	families under s. 49.665, to be used for that the purpose of providing health care

1	coverage under the badger care health care program to low-income families and
2	<u>children who are eligible under s. 49.665</u> .
3	Section 6. 49.665 (1) (c) of the statutes is renumbered 49.665 (1) (c) (intro.) and

Section 6. 49.665 (1) (c) of the statutes is renumbered 49.665 (1) (c) (intro.) and amended to read:

49.665 (1) (c) (intro.) "Employer-subsidized health care coverage" means one of the following:

1. With respect to a family eligible under sub. (4) (a) or a child eligible under sub. (4) (am), family coverage under a group health insurance plan offered by an employer for which the employer pays at least 80% of the cost, excluding any deductibles or copayments that may be required under the plan.

SECTION 7. 49.665 (1) (c) 2. of the statutes is created to read:

49.665 (1) (c) 2. With respect to a child care worker eligible under sub. (4) (ag), coverage under a group health insurance plan offered by the eligible individual's employer, or by the employer of a family member of the eligible individual, for which the eligible individual qualifies and for which the employer pays at least 80% of the cost, excluding any deductibles or copayments that may be required under the plan.

Section 8. 49.665 (3) of the statutes is amended to read:

49.665 (3) ADMINISTRATION. The department shall administer a program to provide the health services and benefits described in s. 49.46 (2) to persons that meet the eligibility requirements specified in sub. (4). The department shall promulgate rules setting forth the application procedures and appeal and grievance procedures. The department may promulgate rules limiting access to the program under this section to defined enrollment periods. The department may also promulgate rules establishing a method by which the department may purchase family coverage offered by the employer of a member of an eligible family or by a member of a child's

household, or individual coverage offered by the employer of an eligible child care worker, under circumstances in which the department determines that purchasing that coverage would not be more costly than providing the coverage under this section.

- **SECTION 9.** 49.665 (4) (ag) of the statutes is created to read:
- 49.665 (4) (ag) An individual is eligible for health care coverage under this section if the individual meets all of the following requirements:
- 1. The individual is employed by a child care provider as a child care worker for at least 30 hours per week.
- 2. The individual's income does not exceed 185% of the poverty line, except that an individual who is already receiving health care coverage under this section may have an income that does not exceed 200% of the poverty line. The department shall establish by rule the criteria to be used to determine income.
- 3. The individual does not have access to employer-subsidized health care coverage and has not had access to employer-subsidized health care coverage within the time period established by the department by rule, but not to exceed 18 months, immediately preceding application for health care coverage under this section. The department may establish exceptions to this subdivision by rule.
- 4. The individual meets all other requirements established by the department by rule. The department may not require that, as a condition of eligibility for health care under this paragraph, an individual be a parent.
 - **SECTION 10.** 49.665 (5) (a) of the statutes is amended to read:
- 49.665 (5) (a) Except as provided in pars. (b) and (bm), a family, or <u>a</u> child who does not reside with his or her parent, <u>or an individual</u> who receives health care coverage under this section shall pay a percentage of the cost of that coverage in

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accordance with a schedule established by the department by rule. If the schedule established by the department requires a family, or a child who does not reside with his or her parent, or an individual to contribute more than 3% of the family's or, child's or individual's income towards the cost of the health care coverage provided under this section, the department shall submit the schedule to the joint committee on finance for review and approval of the schedule. If the cochairpersons of the joint committee on finance do not notify the department within 14 working days after the date of the department's submittal of the schedule that the committee has scheduled a meeting to review the schedule, the department may implement the schedule. If, within 14 days after the date of the department's submittal of the schedule, the cochairpersons of the committee notify the department that the committee has scheduled a meeting to review the schedule, the department may not require a family, or a child who does not reside with his or her parent, or an individual to contribute more than 3% of the family's or, child's, or individual's income unless the joint committee on finance approves the schedule. The joint committee on finance may not approve and the department may not implement a schedule that requires a family or, a child, or an individual to contribute more than 3.5% of the family's or, child's, or individual's income towards the cost of the health care coverage provided under this section.

Section 11. 49.665 (5) (b) of the statutes is amended to read:

49.665 (5) (b) The department may not require a family, or <u>a</u> child who does not reside with his or her parent, <u>or an individual</u> with an income below 150% of the poverty line to contribute to the cost of health care coverage provided under this section.

Section 12. 49.665 (5) (c) of the statutes is amended to read:

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(END)
the health care coverage under this section.
withholding as a means of collecting the family's or individual's share of the cost of
49.665 (5) (c) The department may establish by rule requirements for wage