

1 HOUSE BILL NO. 185

2 INTRODUCED BY E. STAFMAN, R. MARSHALL, T. RUNNING WOLF, M. YAKAWICH, S. HOWELL, G.
3 NIKOLAKAKOS

4
5 A BILL FOR AN ACT ENTITLED: "AN ACT DIRECTING THE DEPARTMENT OF PUBLIC HEALTH AND
6 HUMAN SERVICES TO APPLY FOR AND IMPLEMENT CONTINUOUS ELIGIBILITY FOR CHILDREN
7 UNDER 6 YEARS OF AGE IN THE HEALTHY MONTANA KIDS PLAN; REQUIRING REPORTS TO THE
8 LEGISLATURE; AND PROVIDING AN IMMEDIATE EFFECTIVE DATE."

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10 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

11
12 NEW SECTION. **Section 1. Continuous eligibility for young children enrolled in healthy**
13 **Montana kids plan -- legislative findings and purpose.** (1) The legislature finds that Montana voters
14 approved a ballot initiative in 2008 to create the healthy Montana kids plan, which coordinated access to health
15 coverage for children enrolled in the Montana medicaid program and the children's health insurance program
16 and increased eligibility standards for those programs.

17 (2) The legislature further finds that fluctuations in family income can result in a child being
18 disenrolled and subsequently reenrolled in the programs making up the healthy Montana kids plan multiple
19 times before the child reaches 19 years of age.

20 (3) The legislature further finds that Montana experienced one of the largest percentage increases
21 of children losing coverage under the medicaid program and children's health insurance program during the
22 recent eligibility unwinding, and, as a result, large numbers of uninsured children are eligible but not enrolled in
23 the medicaid program and the children's health insurance program.

24 (4) The legislature further finds that pediatrician-recommended checkups are more frequent in the
25 earliest months and years of a child's life to monitor developmental milestones and address small complications
26 before they become complex conditions.

27 (5) The legislature further finds that continuous eligibility for healthy Montana kids plan enrollees
28 under 6 years of age:

1 (a) will provide consistent, predictable access to health care services at a time of critical early
2 childhood development;

3 (b) will improve health outcomes by providing children with ongoing preventive care and by
4 preventing gaps in care that can occur when a family loses coverage and cannot afford necessary health care
5 services, including medications;

6 (c) may reduce the costs of health care services by allowing children to receive the right level of
7 care at the right time in the right setting and by lessening the chances that they will need emergency care or
8 treatment for conditions that have worsened because of a lack of care; and

9 (d) may improve a child's readiness for school because regular, preventive care may identify
10 physical, behavioral, and developmental concerns that can be addressed before the conditions affect school
11 performance.

12 (6) The legislature further finds that providing continuous eligibility until the child reaches 6 years of
13 age will reduce administrative costs for the department of public health and human services by reducing the
14 need to redetermine a child's eligibility for renewed or continued coverage under the healthy Montana kids plan.

15 (7) It is the purpose of the legislature to allow a child enrolled in the healthy Montana kids plan to
16 remain enrolled in the program until 6 years of age even if a change in family circumstances occurs that would
17 otherwise make the child ineligible for the program.

18 (8) The department of public health and human services may conduct audits to ensure compliance
19 with this section.

20 (9) The legislature directs the department of public health and human services to apply to the
21 centers for medicare and medicaid services for the necessary waivers and state plan amendments to allow for
22 continuous eligibility as provided in this section for children enrolled in the programs making up the healthy
23 Montana kids plan through the end of the month in which a child attains 6 years of age. Among other elements,
24 the department's research and demonstration waiver applications must include but are not limited to testing of
25 the following hypotheses:

26 (a) whether ongoing enrollment will:

27 (i) reduce the percentage of children under 6 years of age who are disenrolled and reenrolled in
28 the programs making up the healthy Montana kids plan;

(ii) increase the number of enrollees participating in well-baby and well-child visits, including developmental assessments to the extent those assessments can be quantified; and

3 (iii) increase access to early intervention or other services that can prevent or lessen
4 developmental delays before kindergarten; and

5 (b) whether continuous eligibility will reduce administrative costs for the department.

6 (10) The department shall:

7 (a) submit requests for the necessary waivers and amendments required under subsection (9) no
8 later than July 1, 2025;

9 (b) notify the appropriate interim or standing committees of the legislature when the department
10 has received a decision from the centers for medicare and medicaid services on a waiver or amendment
11 request and include a copy of the decision with the certification. The department shall submit the notification
12 within 30 days from the date the decision is received and shall submit a copy of the notification to the code
13 commissioner.

14 (c) if the necessary waiver and amendment requests are approved, implement continuous
15 eligibility for eligible children no later than 6 months from the date the approval from the centers for medicare
16 and medicaid services is received by the department.

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18 NEW SECTION. Section 2. **Effective date.** [This act] is effective on passage and approval.

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