

VETO MESSAGE:

No

GOVERNOR'S PRESS RELEASE ON SIGNING:

Yes

FOLLOWING WERE PRINTED:

To check for circulating copies, contact New Jersey State Government Publications at the State Library (609) 278-2640 ext. 102 or refdesk@njstatelib.org

No

REPORTS:

No

HEARINGS:

Yes

NEWSPAPER ARTICLES:

"Health safety net catches more kids", Newark Star Ledger, 7-27-99, p. 16

P.L. 1999, CHAPTER 170, *approved July 26, 1999*

Senate, No. 1756 (*Second Reprint*)

1 **AN ACT** concerning presumptive eligibility for the Children's Health
2 Care Coverage Program and amending P.L.1997, c.272 ²[and
3 P.L.1991, c.187]².

4
5 **BE IT ENACTED** by the Senate and General Assembly of the State
6 of New Jersey:

7
8 1. Section 4 of P.L.1997, c.272 (C.30:4I-4) is amended to read as
9 follows:

10 4. a. The Children's Health Care Coverage Program is established
11 in the Department of Human Services. The purpose of the program
12 shall be to provide subsidized private health insurance coverage, and
13 other health care benefits as determined by the commissioner, to
14 children from birth through 18 years of age within the limits of funds
15 appropriated or otherwise made available for the program. The
16 program shall require copayments and a premium contribution from
17 families with incomes which exceed 150% of the official poverty level,
18 which shall be based upon a sliding income scale. The program shall
19 include the provision of well-child and other preventive services,
20 hospitalization, physician care, laboratory and x-ray services,
21 prescription drugs, mental health services, and other services as
22 determined by the commissioner.

23 b. The commissioner, in consultation with the Commissioner of
24 Health and Senior Services, shall take such actions as are necessary to
25 implement and operate the program in accordance with the provisions
26 governing the State Children's Health Insurance Program in Title XXI
27 of the federal Social Security Act, as provided in Subtitle J of Title IV
28 of the federal "Balanced Budget Act of 1997," Pub.L.105-33.

29 c. The commissioner shall by regulation establish standards for
30 determining eligibility and other requirements for the program,
31 including, but not limited to, premium payments and copayments, and
32 may contract with one or more appropriate entities to assist in
33 administering the program. The commissioner shall take, or cause to
34 be taken, any action necessary to secure for the State the maximum
35 amount of federal financial participation available with respect to the
36 program, subject to the constraints of fiscal responsibility and within
37 the limits of available funding in any fiscal year.

38 d. The commissioner, in consultation with the Commissioner of
39 Health and Senior Services, shall provide by regulation for

EXPLANATION - Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹ Senate SHH committee amendments adopted March 15, 1999.

² Senate SBA committee amendments adopted May 20, 1999.

1 presumptive eligibility for the program in accordance with the
 2 following provisions:

3 (1) A child who presents himself for treatment at an acute care
 4 hospital¹ or a federally qualified health center or² [community] local²
 5 health² [center] department² that provides primary care¹ shall be
 6 deemed presumptively eligible for the program if a preliminary
 7 determination by hospital² [or],² health center¹ ²or local health
 8 department² staff², or by county welfare agency staff stationed at the
 9 hospital pursuant to section 9 of P.L.1991, c.187 (C.26:2H-18.32),]²
 10 indicates that the child meets program eligibility standards established
 11 by regulation of the commissioner¹ [and is a member of a household
 12 with an income which does not exceed 150% of the official poverty
 13 level]¹ ²and is a member of a household with an income which does
 14 not exceed 200% of the official poverty level²:

15 (2) ¹[Prior to the child being discharged by the hospital, the
 16 child's parent shall be required to complete an application for the
 17 program which shall be submitted to the Department of Human
 18 Services for immediate processing; and

19 (3) If the child is determined to be eligible for the program based
 20 upon the completed application, the services provided to the child by
 21 the hospital shall be eligible for coverage under the program] The
 22 provisions of paragraph (1) of this subsection shall² [not] also² apply
 23 to a child who is² presumed² eligible for Medicaid coverage pursuant
 24 to P.L.1968, c.413 (C.30:4D-1 et seq.)² [but not eligible for coverage
 25 under the program]²:

26 (3) If a child is determined to be presumptively eligible for the
 27 program, the child's parent, guardian or caretaker relative shall be
 28 required to submit a completed application for the program no later
 29 than the end of the month following the month in which presumptive
 30 eligibility is determined² [.] and²

31 (4) During the period in which the child is presumptively eligible for
 32 the program, the child shall be eligible to receive all services covered
 33 by the program¹ .

34 (cf: P.L.1997, c.272, s.4)

35

36 ²[2. Section 9 of P.L.1991, c.187 (C.26:2H-18.32) is amended to
 37 read as follows:

38 9. The Commissioner of Health and Senior Services, in consultation
 39 with the Commissioner of Human Services, shall designate those
 40 hospitals at which an employee from the county welfare agency shall
 41 be stationed, on either a full or part-time basis, as appropriate, to
 42 perform eligibility determinations for the Medicaid program pursuant
 43 to P.L.1968, c.413 (C.30:4D-1 et seq.) and the Children's Health Care
 44 Coverage Program pursuant to P.L.1997, c.272 (C.30:4I-1 et seq.).

45 A designated hospital shall reimburse the county welfare agency for

1 the nonfederal share of costs associated with the county welfare
2 agency employee, as certified by the Commissioner of Human
3 Services. The Commissioner of Human Services shall bill the hospital
4 quarterly for the nonfederal share of costs and reimburse the county
5 welfare agency upon receipt of payment from the hospital.
6 (cf: P.L.1992, c.160, s.26)]²

7

8 ²[3. Section 10 of P.L.1991, c.187 (C.30:4D-7a) is amended to
9 read as follows:

10 10. The Commissioner of Human Services shall require that a
11 county welfare agency provide adequate employees to determine
12 Medicaid and Children's Health Care Coverage Program eligibility to
13 any hospital in the county that has been designated by the
14 Commissioner of Health and Senior Services pursuant to section 9 of
15 P.L.1991, c.187 (C.26:2H-18.32).

16 The Commissioner of Human Services shall bill the designated
17 hospital quarterly for the nonfederal share of costs associated with a
18 county welfare agency employee stationed at the hospital, and
19 reimburse the county welfare agency upon receipt of payment from the
20 hospital.

21 (cf: P.L.1991, c.187, s.10)]²

22

23 ²[4.] 2.² This act shall take effect immediately.

24

25

26

27

28 Provides for presumptive eligibility for NJ KidCare under certain
29 circumstances.

SENATE, No. 1756

STATE OF NEW JERSEY
208th LEGISLATURE

INTRODUCED MARCH 15, 1999

Sponsored by:

Senator DONALD T. DIFRANCESCO

District 22 (Middlesex, Morris, Somerset and Union)

Senator NORMAN M. ROBERTSON

District 34 (Essex and Passaic)

Co-Sponsored by:

Senators Matheussen, Singer, Inverso and Bucco

SYNOPSIS

Provides for presumptive eligibility for NJ KidCare under certain circumstances.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 3/16/1999)

S1756 DIFRANCESCO, ROBERTSON

2

1 AN ACT concerning presumptive eligibility for the Children's Health
2 Care Coverage Program and amending P.L.1997, c.272 and
3 P.L.1991, c.187.

4

5 **BE IT ENACTED** by the Senate and General Assembly of the State
6 of New Jersey:

7

8 1. Section 4 of P.L.1997, c.272 (C.30:4I-4) is amended to read as
9 follows:

10 4. a. The Children's Health Care Coverage Program is established
11 in the Department of Human Services. The purpose of the program
12 shall be to provide subsidized private health insurance coverage, and
13 other health care benefits as determined by the commissioner, to
14 children from birth through 18 years of age within the limits of funds
15 appropriated or otherwise made available for the program. The
16 program shall require copayments and a premium contribution from
17 families with incomes which exceed 150% of the official poverty level,
18 which shall be based upon a sliding income scale. The program shall
19 include the provision of well-child and other preventive services,
20 hospitalization, physician care, laboratory and x-ray services,
21 prescription drugs, mental health services, and other services as
22 determined by the commissioner.

23 b. The commissioner, in consultation with the Commissioner of
24 Health and Senior Services, shall take such actions as are necessary to
25 implement and operate the program in accordance with the provisions
26 governing the State Children's Health Insurance Program in Title XXI
27 of the federal Social Security Act, as provided in Subtitle J of Title IV
28 of the federal "Balanced Budget Act of 1997," Pub.L.105-33.

29 c. The commissioner shall by regulation establish standards for
30 determining eligibility and other requirements for the program,
31 including, but not limited to, premium payments and copayments, and
32 may contract with one or more appropriate entities to assist in
33 administering the program. The commissioner shall take, or cause to
34 be taken, any action necessary to secure for the State the maximum
35 amount of federal financial participation available with respect to the
36 program, subject to the constraints of fiscal responsibility and within
37 the limits of available funding in any fiscal year.

38 d. The commissioner, in consultation with the Commissioner of
39 Health and Senior Services, shall provide by regulation for
40 presumptive eligibility for the program in accordance with the
41 following provisions:

42 (1) A child who presents himself for treatment at an acute care
43 hospital shall be deemed presumptively eligible for the program if a

EXPLANATION - Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

1 preliminary determination by hospital staff, or by county welfare
2 agency staff stationed at the hospital pursuant to section 9 of
3 P.L.1991, c.187 (C.26:2H-18.32), indicates that the child meets
4 program eligibility standards established by regulation of the
5 commissioner and is a member of a household with an income which
6 does not exceed 150% of the official poverty level;

7 (2) Prior to the child being discharged by the hospital, the child's
8 parent shall be required to complete an application for the program
9 which shall be submitted to the Department of Human Services for
10 immediate processing; and

11 (3) If the child is determined to be eligible for the program based
12 upon the completed application, the services provided to the child by
13 the hospital shall be eligible for coverage under the program.

14 (cf: P.L.1997, c.272, s.4)

15
16 2. Section 9 of P.L.1991, c.187 (C.26:2H-18.32) is amended to
17 read as follows:

18 9. The Commissioner of Health and Senior Services, in consultation
19 with the Commissioner of Human Services, shall designate those
20 hospitals at which an employee from the county welfare agency shall
21 be stationed, on either a full or part-time basis, as appropriate, to
22 perform eligibility determinations for the Medicaid program pursuant
23 to P.L.1968, c.413 (C.30:4D-1 et seq.) and the Children's Health Care
24 Coverage Program pursuant to P.L.1997, c.272 (C.30:4I-1 et seq.).

25 A designated hospital shall reimburse the county welfare agency for
26 the nonfederal share of costs associated with the county welfare
27 agency employee, as certified by the Commissioner of Human
28 Services. The Commissioner of Human Services shall bill the hospital
29 quarterly for the nonfederal share of costs and reimburse the county
30 welfare agency upon receipt of payment from the hospital.

31 (cf: P.L.1992, c.160, s.26)

32
33 3. Section 10 of P.L.1991, c.187 (C.30:4D-7a) is amended to read
34 as follows:

35 10. The Commissioner of Human Services shall require that a
36 county welfare agency provide adequate employees to determine
37 Medicaid and Children's Health Care Coverage Program eligibility to
38 any hospital in the county that has been designated by the
39 Commissioner of Health and Senior Services pursuant to section 9 of
40 P.L.1991, c.187 (C.26:2H-18.32).

41 The Commissioner of Human Services shall bill the designated
42 hospital quarterly for the nonfederal share of costs associated with a
43 county welfare agency employee stationed at the hospital, and
44 reimburse the county welfare agency upon receipt of payment from the
45 hospital.

46 (cf: P.L.1991, c.187, s.10)

1 4. This act shall take effect immediately.

2

3

4

STATEMENT

5

6 This bill provides for the establishment of presumptive eligibility for
7 the Children's Health Care Coverage Program (NJ KidCare)
8 established pursuant to P.L.1997, c.272 (N.J.S.A.30:4I-1 et seq.)
9 under certain circumstances.

10 Specifically, the bill provides that a child who presents himself for
11 treatment at an acute care hospital shall be deemed presumptively
12 eligible for NJ KidCare if a preliminary determination by hospital staff,
13 or by county welfare agency staff who are stationed at the hospital
14 pursuant to N.J.S.A.26:2H-18.32, indicates that the child meets
15 program eligibility standards and is a member of a household with an
16 income which does not exceed 150% of the official poverty level. The
17 bill does require, however, that, prior to the child being discharged by
18 the hospital, the child's parent shall be required to complete a NJ
19 KidCare application which shall be submitted to the Department of
20 Human Services for immediate processing. If the child is determined
21 to be eligible for NJ KidCare based upon the completed application,
22 the services provided to the child by the hospital shall be eligible for
23 coverage under the program.

ASSEMBLY APPROPRIATIONS COMMITTEE

STATEMENT TO

[Second Reprint]

SENATE, No. 1756

STATE OF NEW JERSEY

DATED: JUNE 3, 1999

The Assembly Appropriations Committee reports favorably Senate Bill No. 1756 (2R).

Senate Bill No. 1756 (2R) amends the statute governing the Children's Health Care Coverage Program ("NJ KidCare") to provide for a presumption of eligibility for coverage under the program in certain circumstances.

NJ KidCare is a program that provides children from low-income families who are under 19 years of age with subsidized private health insurance coverage, well-child and other preventive services, hospitalization, physician care, laboratory and x-ray services, prescription drugs, mental health services, and other benefits as determined by the Commissioner of Human Services. The program is designed in accordance with the provisions of the "State Children's Health Insurance Program" under Title XXI of the federal Social Security Act and is funded in substantial part with federal funds authorized under that title.

Current law makes no provision for the extension, even in a health emergency, of NJ KidCare coverage to an eligible but non-enrolled family prior to the submission or during the pendency of its enrollment application. To address that situation, this bill provides that a child who presents for treatment at an acute care hospital or a federally qualified health center or local health department that provides primary care shall be deemed presumptively eligible for NJ KidCare if a preliminary determination by hospital, health center, or health department staff indicates that the child (a) meets program eligibility standards, and (b) is a member of a household with an income that does not exceed 200% of the federal poverty level.

The bill provides that whenever a child is determined to be presumptively eligible for NJ KidCare, the child's parent, guardian or caretaker relative must submit a completed application for NJ KidCare by the end of the month following the month in which presumptive eligibility was determined.

The bill stipulates that during the period in which the child is presumptively eligible for NJ KidCare, the child shall be eligible to

receive all services covered by the program.

As reported by this committee, this bill is identical to Assembly Bill No. 3015 (1R) as amended and reported by this committee.

FISCAL IMPACT:

This bill has no incremental cost because most children who would qualify for NJ KidCare through presumptive eligibility will qualify for the program once their applications are processed. The program currently covers about 30,000 children, although the Department of Human Services originally estimated that over 100,000 would qualify and funding was provided to meet that estimated enrollment. State matching funds of approximately \$47.6 million, combined with federal funds, will provide \$136 million annually for NJ KidCare. These State and federal funds are expected to be sufficient to cover any increase in the number of children participating in NJ KidCare as a result of the presumptive eligibility provisions.

SENATE HEALTH COMMITTEE

STATEMENT TO

SENATE, No. 1756

with committee amendments

STATE OF NEW JERSEY

DATED: MARCH 15, 1999

The Senate Health Committee reports favorably and with committee amendments Senate Bill No. 1756.

As amended by the committee, this bill provides for the establishment of presumptive eligibility for the Children's Health Care Coverage Program (NJ KidCare) established pursuant to N.J.S.A.30:4I-1 et seq. under certain circumstances.

Specifically, the bill provides that a child who presents himself for treatment at an acute care hospital or a federally qualified health center or community health center that provides primary care shall be deemed presumptively eligible for NJ KidCare if a preliminary determination by hospital or health center staff, or by county welfare agency staff who are stationed at the hospital pursuant to N.J.S.A.26:2H-18.32, indicates that the child meets program eligibility standards.

The bill provides, however, that:

- the provisions providing for presumptive eligibility shall not apply to a child who is eligible for Medicaid coverage but not eligible for coverage under NJ KidCare; and
- if a child is determined to be presumptively eligible for NJ KidCare, the child's parent, guardian or caretaker relative shall be required to submit a completed application for NJ KidCare no later than the end of the month following the month in which presumptive eligibility was determined.

The bill stipulates that during the period in which the child is presumptively eligible for NJ KidCare, the child shall be eligible to receive all services covered by the program.

The committee amended the bill to:

-- permit presumptive eligibility for NJ KidCare to be established for a child who presents himself for treatment at a federally qualified health center or community health center that provides primary care (in addition to an acute care hospital);

-- clarify that presumptive eligibility shall not apply to a child who is eligible for Medicaid coverage but not eligible for NJ KidCare coverage;

-- delete the limitation that the presumptive eligibility shall apply

only to a child who is a member of a household with an income which does not exceed 150% of the official poverty level, and provide, instead, that it shall apply to any child who meets program eligibility standards established by the Commissioner of Human Services;

-- require the parent, guardian or caretaker relative of a child who is determined to be presumptively eligible for NJ KidCare to submit a completed NJ KidCare application no later than the end of the month following the month in which presumptive eligibility is determined; and

-- stipulate that during the period in which the child is presumptively eligible for NJ KidCare, the child shall be eligible to receive all services covered by the program.

SENATE BUDGET AND APPROPRIATIONS COMMITTEE

STATEMENT TO

[First Reprint]

SENATE, No. 1756

with committee amendments

STATE OF NEW JERSEY

DATED: MAY 20, 1999

The Senate Budget and Appropriations Committee reports favorably and with committee amendments Senate Bill No. 1756 (1R).

This bill amends the statute governing the Children's Health Care Coverage Program ("NJ KidCare") to provide for a presumption of eligibility for coverage under the program in certain circumstances.

NJ KidCare is a program that provides children from low-income families who are under 19 years of age with subsidized private health insurance coverage, well-child and other preventive services, hospitalization, physician care, laboratory and x-ray services, prescription drugs, mental health services, and other benefits as determined by the Commissioner of Human Services. The program is designed in accordance with the provisions of the "State Children's Health Insurance Program" under Title XXI of the federal Social Security Act and is funded in substantial part with federal funds authorized under that title.

Current law makes no provision for the extension, even in a health emergency, of NJ KidCare coverage to an eligible but non-enrolled family prior to the submission or during the pendency of its enrollment application. To address that situation, this bill, as amended, provides that a child who presents himself for treatment at an acute care hospital or a federally qualified health center or local health department that provides primary care shall be deemed presumptively eligible for NJ KidCare if a preliminary determination by hospital, health center, or health department staff indicates that the child (a) meets program eligibility standards, and (b) is a member of a household with an income that does not exceed 200% of the official poverty level.

The bill provides that whenever a child is determined to be presumptively eligible for NJ KidCare, the child's parent, guardian or caretaker relative must submit a completed application for NJ KidCare by the end of the month following the month in which presumptive eligibility was determined.

The bill stipulates that during the period in which the child is

presumptively eligible for NJ KidCare, the child shall be eligible to receive all services covered by the program.

COMMITTEE AMENDMENTS

Committee amendments to this bill (1) revise the list of health facilities at which the determination of a child's presumptive eligibility for NJ KidCare program coverage may be made by replacing "community health centers" with "local health departments", (2) delete a provision authorizing county welfare agency staff to make such a determination, (3) incorporate the requirement that such presumed eligibility include a preliminary determination of income qualification, and (4) permit children presumed eligible for Medicaid coverage to receive a determination of presumptive eligibility for NJ KidCare coverage in the same manner as authorized for other children under the bill.

FISCAL IMPACT

There is no additional cost associated with the legislation, as most children who would qualify for NJ KidCare through presumptive eligibility would qualify for the program once their application is processed. The program currently covers about 30,000 children although DHS originally estimated that over 100,000 would qualify and funding was provided to meet that estimated enrollment. State matching funds of approximately \$47.6 million, combined with federal funds, would provide \$136 million annually for NJ KidCare. These State and federal funds should be sufficient to cover any increase in the number of children participating in NJ KidCare as a result of the presumptive eligibility requirement.

LEGISLATIVE FISCAL ESTIMATE

[First Reprint]

SENATE, No. 1756

STATE OF NEW JERSEY

208th LEGISLATURE

DATED: JUNE 29, 1999

BILL SUMMARY

Senate Bill No. 1756 (1R) of 1999 provides for establishment of presumptive eligibility in the NJ KidCare program under certain circumstances. Specifically, a child who presents himself for treatment at an acute care hospital or a federally qualified health center or community health center that provides primary care will be considered presumptively eligible for NJ KidCare and all services covered by the program if a preliminary determination by hospital or health center staff, or by county welfare agency staff who are stationed at the hospital pursuant to N.J.S.A.26:2H-18.32, indicates that the child meets program eligibility standards. If determined presumptively eligible for NJ KidCare, the child's parent, guardian or caretaker relative would be required to submit a completed application for NJ KidCare no later than the end of the month following the month in which presumptive eligibility was determined.

AGENCY COMMENTS

DHS and the Office of Management and Budget have not provided any fiscal information on the legislation.

OFFICE OF LEGISLATIVE SERVICES COMMENTS

There is no additional cost associated with the legislation, as most children who would qualify for NJ KidCare through presumptive eligibility would qualify for NJ KidCare once their application is processed. The program currently covers about 30,000 children although DHS originally estimated that over 100,000 would qualify and funding was provided to meet the estimated enrollment. State matching funds of approximately \$47.6 million, combined with federal funds would provide \$136 million annually for NJ KidCare. These State and federal funds should be sufficient to cover any increase in the number of children participating in NJ KidCare as a result of the presumptive eligibility requirement.

This fiscal estimate has been prepared pursuant to P.L.1980, c.67.

ASSEMBLY, No. 3015

STATE OF NEW JERSEY 208th LEGISLATURE

INTRODUCED MARCH 18, 1999

Sponsored by:

Assemblyman JOHN V. KELLY
District 36 (Bergen, Essex and Passaic)
Assemblyman PAUL DIGAETANO
District 36 (Bergen, Essex and Passaic)

Co-Sponsored by:

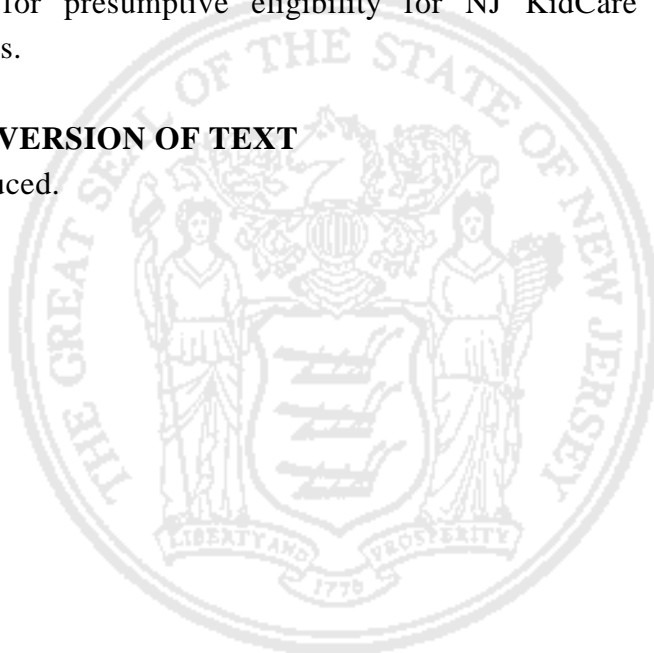
Assemblymen Thompson, Luongo, Corodemus, Gibson, Geist,
Assemblywoman Heck, Assemblymen Azzolina, T.Smith, Blee,
Assemblywoman Crecco, Assemblymen Malone, Cottrell, Asselta, Zecker,
Russo, Assemblywoman Vandervalk and Assemblyman LeFevre

SYNOPSIS

Provides for presumptive eligibility for NJ KidCare under certain circumstances.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 5/4/1999)

1 AN ACT concerning presumptive eligibility for the Children's Health
2 Care Coverage Program and amending P.L.1997, c.272 and
3 P.L.1991, c.187.

4

5 **BE IT ENACTED** by the Senate and General Assembly of the State
6 of New Jersey:

7

8 1. Section 4 of P.L.1997, c.272 (C.30:4I-4) is amended to read as
9 follows:

10 4. a. The Children's Health Care Coverage Program is established
11 in the Department of Human Services. The purpose of the program
12 shall be to provide subsidized private health insurance coverage, and
13 other health care benefits as determined by the commissioner, to
14 children from birth through 18 years of age within the limits of funds
15 appropriated or otherwise made available for the program. The
16 program shall require copayments and a premium contribution from
17 families with incomes which exceed 150% of the official poverty level,
18 which shall be based upon a sliding income scale. The program shall
19 include the provision of well-child and other preventive services,
20 hospitalization, physician care, laboratory and x-ray services,
21 prescription drugs, mental health services, and other services as
22 determined by the commissioner.

23 b. The commissioner, in consultation with the Commissioner of
24 Health and Senior Services, shall take such actions as are necessary to
25 implement and operate the program in accordance with the provisions
26 governing the State Children's Health Insurance Program in Title XXI
27 of the federal Social Security Act, as provided in Subtitle J of Title IV
28 of the federal "Balanced Budget Act of 1997," Pub.L.105-33.

29 c. The commissioner shall by regulation establish standards for
30 determining eligibility and other requirements for the program,
31 including, but not limited to, premium payments and copayments, and
32 may contract with one or more appropriate entities to assist in
33 administering the program. The commissioner shall take, or cause to
34 be taken, any action necessary to secure for the State the maximum
35 amount of federal financial participation available with respect to the
36 program, subject to the constraints of fiscal responsibility and within
37 the limits of available funding in any fiscal year.

38 d. The commissioner, in consultation with the Commissioner of
39 Health and Senior Services, shall provide by regulation for
40 presumptive eligibility for the program in accordance with the
41 following provisions:

42 (1) A child who presents himself for treatment at an acute care
43 hospital shall be deemed presumptively eligible for the program if a

EXPLANATION - Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and intended to be omitted in the law.

Matter underlined thus is new matter.

1 preliminary determination by hospital staff, or by county welfare
2 agency staff stationed at the hospital pursuant to section 9 of
3 P.L.1991, c.187 (C.26:2H-18.32), indicates that the child meets
4 program eligibility standards established by regulation of the
5 commissioner and is a member of a household with an income which
6 does not exceed 150% of the official poverty level;

7 (2) Prior to the child being discharged by the hospital, the child's
8 parent shall be required to complete an application for the program
9 which shall be submitted to the Department of Human Services for
10 immediate processing; and

11 (3) If the child is determined to be eligible for the program based
12 upon the completed application, the services provided to the child by
13 the hospital shall be eligible for coverage under the program.

14 (cf: P.L.1997, c.272, s.4)

15
16 2. Section 9 of P.L.1991, c.187 (C.26:2H-18.32) is amended to
17 read as follows:

18 9. The Commissioner of Health and Senior Services, in consultation
19 with the Commissioner of Human Services, shall designate those
20 hospitals at which an employee from the county welfare agency shall
21 be stationed, on either a full or part-time basis, as appropriate, to
22 perform eligibility determinations for the Medicaid program pursuant
23 to P.L.1968, c.413 (C.30:4D-1 et seq.) and the Children's Health Care
24 Coverage Program pursuant to P.L.1997, c.272 (C.30:4I-1 et seq.).

25 A designated hospital shall reimburse the county welfare agency for
26 the nonfederal share of costs associated with the county welfare
27 agency employee, as certified by the Commissioner of Human
28 Services. The Commissioner of Human Services shall bill the hospital
29 quarterly for the nonfederal share of costs and reimburse the county
30 welfare agency upon receipt of payment from the hospital.

31 (cf: P.L.1992, c.160, s.26)

32
33 3. Section 10 of P.L.1991, c.187 (C.30:4D-7a) is amended to read
34 as follows:

35 10. The Commissioner of Human Services shall require that a
36 county welfare agency provide adequate employees to determine
37 Medicaid and Children's Health Care Coverage Program eligibility to
38 any hospital in the county that has been designated by the
39 Commissioner of Health and Senior Services pursuant to section 9 of
40 P.L.1991, c.187 (C.26:2H-18.32).

41 The Commissioner of Human Services shall bill the designated
42 hospital quarterly for the nonfederal share of costs associated with a
43 county welfare agency employee stationed at the hospital, and
44 reimburse the county welfare agency upon receipt of payment from the
45 hospital.

46 (cf: P.L.1991, c.187, s.10)

1 4. This act shall take effect immediately.

2

3

4

STATEMENT

5

6 This bill provides for the establishment of presumptive eligibility for
7 the Children's Health Care Coverage Program (NJ KidCare)
8 established pursuant to P.L.1997, c.272 (N.J.S.A.30:4I-1 et seq.)
9 under certain circumstances.

10 Specifically, the bill provides that a child who presents himself for
11 treatment at an acute care hospital shall be deemed presumptively
12 eligible for NJ KidCare if a preliminary determination by hospital staff,
13 or by county welfare agency staff who are stationed at the hospital
14 pursuant to N.J.S.A.26:2H-18.32, indicates that the child meets
15 program eligibility standards and is a member of a household with an
16 income which does not exceed 150% of the official poverty level. The
17 bill does require, however, that, prior to the child being discharged by
18 the hospital, the child's parent shall be required to complete a NJ
19 KidCare application which shall be submitted to the Department of
20 Human Services for immediate processing. If the child is determined
21 to be eligible for NJ KidCare based upon the completed application,
22 the services provided to the child by the hospital shall be eligible for
23 coverage under the program.

ASSEMBLY HEALTH COMMITTEE

STATEMENT TO

ASSEMBLY, No. 3015

with committee amendments

STATE OF NEW JERSEY

DATED: MAY 17, 1999

The Assembly Health Committee reports favorably and with committee amendments Assembly Bill No. 3015.

As amended by the committee, this bill provides for the establishment of presumptive eligibility for the Children's Health Care Coverage Program (NJ KidCare) established pursuant to N.J.S.A.30:4I-1 et seq. under certain circumstances.

Specifically, the bill provides that a child who presents himself for treatment at an acute care hospital or a federally qualified health center or local health department that provides primary care shall be deemed presumptively eligible for NJ KidCare if a preliminary determination by hospital, health center or local health department staff indicates that the child meets program eligibility standards.

The bill provides, however, that:

- the provisions providing for presumptive eligibility shall not apply to a child who is eligible for Medicaid coverage but not eligible for coverage under NJ KidCare; and
- if a child is determined to be presumptively eligible for NJ KidCare, the child's parent, guardian or caretaker relative shall be required to submit a completed application for NJ KidCare no later than the end of the month following the month in which presumptive eligibility was determined.

The bill stipulates that during the period in which the child is presumptively eligible for NJ KidCare, the child shall be eligible to receive all services covered by the program.

The committee amended the bill to:

-- permit presumptive eligibility for NJ KidCare to be established for a child who presents himself for treatment at a federally qualified health center or local health department that provides primary care (in addition to an acute care hospital);

-- delete the provisions with respect to county welfare agency staff who are stationed at the hospital pursuant to N.J.S.A.26:2H-18.32 performing eligibility determinations for NJ KidCare;

-- clarify that presumptive eligibility shall also apply to a child who is presumed eligible for Medicaid coverage;

-- provide that presumptive eligibility shall apply only to a child who is a member of a household with an income which does not exceed 200% (rather than 150%) of the official poverty level and meets program eligibility standards established by the Commissioner of Human Services;

-- require the parent, guardian or caretaker relative of a child who is determined to be presumptively eligible for NJ KidCare to submit a completed NJ KidCare application no later than the end of the month following the month in which presumptive eligibility is determined; and

-- stipulate that during the period in which the child is presumptively eligible for NJ KidCare, the child shall be eligible to receive all services covered by the program.

As reported by the committee, this bill is similar to Senate Bill No. 1756 (1R) (DiFrancesco/Robertson), which is currently pending in the Senate Budget and Appropriations Committee.

ASSEMBLY APPROPRIATIONS COMMITTEE

STATEMENT TO

[First Reprint]

ASSEMBLY, No. 3015

with Assembly committee amendments

STATE OF NEW JERSEY

DATED: JUNE 3, 1999

The Assembly Appropriations Committee reports favorably Assembly Bill No. 3015 (1R) with committee amendments.

Assembly Bill No. 3015 (1R), as amended, amends the statute governing the Children's Health Care Coverage Program ("NJ KidCare") to provide for a presumption of eligibility for coverage under the program in certain circumstances.

NJ KidCare is a program that provides children from low-income families who are under 19 years of age with subsidized private health insurance coverage, well-child and other preventive services, hospitalization, physician care, laboratory and x-ray services, prescription drugs, mental health services, and other benefits as determined by the Commissioner of Human Services. The program is designed in accordance with the provisions of the "State Children's Health Insurance Program" under Title XXI of the federal Social Security Act and is funded in substantial part with federal funds authorized under that title.

Current law makes no provision for the extension, even in a health emergency, of NJ KidCare coverage to an eligible but non-enrolled family prior to the submission or during the pendency of its enrollment application. To address that situation, this bill provides that a child who presents for treatment at an acute care hospital or a federally qualified health center or local health department that provides primary care shall be deemed presumptively eligible for NJ KidCare if a preliminary determination by hospital, health center, or health department staff indicates that the child (a) meets program eligibility standards, and (b) is a member of a household with an income that does not exceed 200% of the federal poverty level.

The bill provides that whenever a child is determined to be presumptively eligible for NJ KidCare, the child's parent, guardian or caretaker relative must submit a completed application for NJ KidCare by the end of the month following the month in which presumptive eligibility was determined.

The bill stipulates that during the period in which the child is presumptively eligible for NJ KidCare, the child shall be eligible to receive all services covered by the program.

As amended and reported by this committee, this bill is identical to Senate Bill No. 1756 (2R) as reported by this committee.

FISCAL IMPACT:

This bill has no incremental cost because most children who would qualify for NJ KidCare through presumptive eligibility will qualify for the program once their applications are processed. The program currently covers about 30,000 children, although the Department of Human Services originally estimated that over 100,000 would qualify and funding was provided to meet that estimated enrollment. State matching funds of approximately \$47.6 million, combined with federal funds, will provide \$136 million annually for NJ KidCare. These State and federal funds are expected to be sufficient to cover any increase in the number of children participating in NJ KidCare as a result of the presumptive eligibility provisions.

COMMITTEE AMENDMENTS:

The amendments change a technical reference in the title of the bill.

LEGISLATIVE FISCAL ESTIMATE

[Second Reprint]

ASSEMBLY, No. 3015

STATE OF NEW JERSEY

208th LEGISLATURE

DATED: JULY 6, 1999

BILL SUMMARY

Assembly Bill No. 3015 (2R) of 1999 provides for the establishment of presumptive eligibility for the Children's Health Care Coverage Program (NJ KidCare) under certain circumstances. Specifically, the bill provides that a child who presents himself for treatment at an acute care hospital, a federally qualified health center or local health department that provides primary care shall be deemed presumptively eligible for NJ KidCare, if a preliminary determination indicates that the child meets program eligibility standards. Presumptive eligibility applies only to a child who is a member of a household with an income which does not exceed 200% of the official federal poverty level.

AGENCY COMMENTS

The Department of Human Services (DHS) and the Office of Management and Budget have not provided any fiscal information on the legislation.

OFFICE OF LEGISLATIVE SERVICES COMMENTS

There is no additional cost associated with the legislation as most children would qualify for NJ KidCare once their application is processed. The program currently covers about 30,000 children although DHS originally estimated that over 100,000 would qualify for the program and funding was provided to meet the estimated enrollment. Approximately \$136 million in State and federal funds are available in FY1999 and FY2000, respectively, to pay for costs of NJ KidCare. These State and federal funds should be sufficient to cover any increase in the number of children participating in NJ KidCare as a result of the presumptive eligibility requirement.

This legislative fiscal estimate has been produced by the Office of Legislative Services due to the failure of the Executive Branch to respond to our request for a fiscal note.

This fiscal estimate has been prepared pursuant to P.L.1980, c.67.

PO BOX 004
TRENTON, NJ 08625

Office of the Governor
NEWS RELEASE

CONTACT: Jayne O'Connor
Winnie Comfort
609-777-2600

RELEASE: July 26, 1999

**Governor Signs Bills Expanding NJ KidCare Program to Thousands More
Children;
Spends Day Touring Monmouth County**

New Jersey Gov. Christie Whitman today signed legislation to expand the NJ KidCare program, making affordable health insurance available to tens of thousands additional New Jersey children.

"NJ KidCare was established to ensure that uninsured children get the medical care they need," said Gov. Whitman.

"Today we are expanding the NJ KidCare program to assist hard- working families who are struggling to pay for their own individual health insurance plan. We are ensuring that New Jersey families earning the maximum annual income allowed under federal law qualify for the program. And we are increasing our efforts to contact each and every family with children who could be eligible to benefit from NJ KidCare," the Governor said.

Gov. Whitman signed the expansive health care legislation at Brookdale Community College in Lincroft during a day-long tour of Monmouth County.

The legislation, a package of four bills, is intended to increase the number of children in NJ KidCare by expanding the eligibility requirements and by expanding public awareness of the program eligibility and benefits.

S-1659, sponsored by Senators Richard Codey (D-Essex) and Joseph Vitale (D-Middlesex) and Assembly Members Herbert Conaway (D-Burlington/Camden) and Charlotte Vandervalk (R-Bergen), removes the unintended obstacle of a six-month uninsured waiting period before becoming eligible for NJ KidCare for working families who are struggling to pay their own individual health insurance costs.

S-1758, sponsored by Senate President Donald DiFrancesco and Senator Jack Sinagra (R-Middlesex) and Assembly Members Tom Smith (R-Monmouth) and Steve Coredemus (R-Monmouth) increases the eligible income to include families making between 200 and 350 percent of the federal poverty level. Under these expanded guidelines, a family of four with an annual income of \$58,450 would qualify for NJ KidCare, up from the former limit of \$33,400.

In addition to the expansion of who is eligible for the NJ KidCare, the new legislation is intended to increase public awareness of the program.

Gov. Whitman said, "The expansion of NJ KidCare will be wasted if we don't increase awareness of the program. These bills specifically address the need for increased enrollment efforts."

S-1756, sponsored by Senate President Donald DiFrancesco and Senator Norman Robertson (R-Essex/Passaic) and Assembly Members John Kelly (R-Bergen/Essex/ Passaic) and Paul DiGaetano (R-Bergen/Essex/Passaic) allows certain children who are eligible, but not yet enrolled in the program, to receive NJ KidCare benefits for needed medical services at acute-care hospitals, federally-qualified health centers and local health department facilities. The family must be evaluated in an interview and, if the family income appears to meet the qualification of up to 200 percent of the federal poverty level, they are given "presumptive eligibility" for benefits. This must be followed up with a completed application and income evaluation to continue receiving NJ KidCare benefits.

S-1757, sponsored by Senate President Donald DiFrancesco and Senator Diane Allen (R-Burlington/Camden) and Assembly Members Samuel Thompson (R-Middlesex/ Monmouth) and Joseph Azzolina (R-Middlesex/Monmouth) establishes partnerships between NJ KidCare and schools, childcare organizations and health care entities to actively reach out to families to identify children eligible for NJ KidCare. The designated community organizations will receive \$25 for each household enrolled in the program. The bill provides \$75,000 to carry out the enrollment program.

The bill signing in Lincroft was one of many events the Governor attended around Monmouth County today. She began the day at the Vietnam Veterans Memorial in Holmdel to participate in the unveiling of a US Postal Service stamp commemorating Vietnam War Veterans.

During a stop at the Hall of Records in Freehold Borough, Gov. Whitman presented a ceremonial check for \$430 million to the Monmouth County Freeholders. The check represents a combination of school aid, municipal aid, various special appropriations, open space preservation funds and the first phase of the New Jersey SAVER property tax rebate program.

The Governor also visited the newly-constructed Aberdeen-Matawan train station in Aberdeen. The station serves 3,400 travelers daily and is one of five in the NJ TRANSIT North Jersey Coast Line slated to receive high-level platforms, accessible by stairs and ramps, to comply with the Americans with Disabilities Act. The station project costs \$7.1 million, Ofunded by the Casino Reinvestment Development Authority and Transportation Act Fund monies. It is scheduled to be completed in the fall of 1999.

And in Allenhurst, the Governor presented a \$350,000 ceremonial check to the Deal Lake Commission for the lake restoration project. The state funds, from the 1996 bond act approved by voters for the revitalization of New Jersey's ports and lakes, will be matched by in-kind services from the Deal Lake Commission, the Colonial Terrace Protective Assoc., and Ocean Twp.

The Governor concluded the day's events visiting with local residents on walking tours, first through historic Red Bank, home of author and critic Edmund Wilson and jazz great Count Basie, and then through the 95-year-old Keansburg Amusement Park.