

Joint Committee on Ways and Means

Carrier – House: Rep. Greenlick
Carrier – Senate: Sen. Bates

Revenue: No revenue impact

Fiscal: Fiscal statement issued

Action: Do Pass the A-Engrossed Measure

Vote: 21 – 2 – 1

House

Yeas: Barker, Buckley, Cowan, Edwards, Garrard, Gilman, Jenson, Komp, Kotek, Nathanson, Richardson

Nays:

Exc: G. Smith

Senate

Yeas: Bates, Courtney, Edwards, Girod, Johnson, Monroe, Nelson, Shields, Verger, Winters

Nays: Kruse, Whitsett

Exc:

Prepared By: John Britton, Legislative Fiscal Office

Meeting Date: February 18, 2010

WHAT THE MEASURE DOES: Creates a new eligibility category in the Oregon Health Plan for individuals from ages 18 to 21 who, immediately prior to their 18th birthdays, were in a foster family home or licensed child-caring agency or institution, and ones for whom a public agency of Oregon is assuming financial responsibility. Children in foster care are eligible for Medicaid-funded health care. This measure would extent that eligibility through a child's 21st year. These young adults would be added to the Health Care for All Oregonian Children, a 2009 initiative to expand health coverage for children. The Oregon Health Authority would be required to file an amendment to the state's Medicaid plan by March 31, 2010.

ISSUES DISCUSSED:

- Cost of the expansion
- The need for the expansion

EFFECT OF COMMITTEE AMENDMENT: No amendment.

BACKGROUND: Today, children who are in foster care receive their medical coverage through the Oregon Health Plan, or OHP. However, upon becoming 19 years old, they are no longer eligible for this coverage. A Medicaid option, known as the Chafee option, allows states to extend Medicaid (OHP) to former foster children up to age 21. Currently, there are 21 states that use the Chafee option to provide health care coverage to former foster youth.

The 2009 Legislative Assembly passed HB 2116 which established the Health Care for All Oregonian Children program—an expansion of health coverage to children. Children in households with incomes up to the 300% of the federal poverty level can receive Medicaid or subsidized commercial health insurance depending on their specific household income. The program is funded with health insurance premium tax revenue. The Department of Human Services reports that it will have adequate premium tax revenue to fund the original Health Care for All Oregon Children program and this proposed expansion. The expansion alone is expected to cost \$0.5 million Other Funds (premium tax revenue) and \$1.3 million total funds in the 2009-11 biennium and \$1.8 million Other Funds (premium tax revenue) and \$4.6 million total funds in the 2011-13 biennium. The fiscal estimate assumes a May 1, 2010 implementation date.