

Enrolled Senate Bill 558

Sponsored by Senators ROBLAN, KRUSE, Representatives HUFFMAN, KENY-GUYER; Senator BOQUIST, Representatives ALONSO LEON, OLSON (Presession filed.)

CHAPTER

AN ACT

Relating to improving the health of Oregon children; creating new provisions; amending ORS 413.201 and 414.231; and declaring an emergency.

Be It Enacted by the People of the State of Oregon:

SECTION 1. ORS 413.201 is amended to read:

413.201. (1) The Oregon Health Authority is responsible for statewide outreach and marketing of the Health Care for All Oregon Children program established in ORS 414.231 and administered by the authority with the goal of enrolling in *[those programs]* **the program** all eligible children residing in this state. **The authority, in collaboration with the work group described in subsection (3) of this section, shall evaluate and implement the outreach and marketing strategies designed to most effectively encourage the enrollment of children in the program.**

(2) To maximize the enrollment and retention of eligible children in the Health Care for All Oregon Children program, the authority shall develop and administer a grant program to provide funding to organizations and community based groups to deliver culturally specific and targeted outreach and direct application assistance to:

- (a) Members of racial, ethnic and language minority communities;
- (b) Children living in geographic isolation; and
- (c) Children and family members with additional barriers to accessing health care, such as cognitive, mental health or sensory disorders, physical disabilities or chemical dependency, and children experiencing homelessness.

(3) The authority shall convene a work group, consisting of individuals with experience in conducting outreach to the individuals described in subsection (2)(a) to (c) of this section, to advise and assist the authority in carrying out its duties under this section.

SECTION 2. ORS 414.231 is amended to read:

414.231. (1) As used in this section, "child" means a person under 19 years of age.

(2) The Health Care for All Oregon Children program is established to make affordable, accessible health care available to all of Oregon's children. The program provides medical assistance to children, funded in whole or in part by Title XIX of the Social Security Act, by the State Children's Health Insurance Program under Title XXI of the Social Security Act and by moneys appropriated or allocated for that purpose by the Legislative Assembly.

(3) A child is eligible for medical assistance under subsection (2) of this section if the child *[is lawfully present]* **resides** in this state and the income of the child's family is[:]

[(a) At or below 200 percent of the federal poverty guidelines; or]

[(b) Above 200 percent of the federal poverty guidelines and] at or below 300 percent of the federal poverty guidelines[, *as long as federal financial participation is available for the costs of the coverage*].

(4) There is no asset limit to qualify for the program.

(5)(a) A child receiving medical assistance through the Health Care for All Oregon Children program is continuously eligible for a minimum period of 12 months or until the child reaches 19 years of age, whichever comes first.

(b) The Department of Human Services or the Oregon Health Authority shall reenroll a child for successive 12-month periods of enrollment as long as the child is eligible for medical assistance on the date of reenrollment and the child has not yet reached 19 years of age.

(c) A child may not be required to submit a new application as a condition of reenrollment under paragraph (b) of this subsection.[, *and*]

(6) The department or the authority must determine the child's eligibility for **or reenrollment in** medical assistance using information and sources available to the department or the authority [*or documentation that is readily available to the child or the child's caretaker*]. **If information and sources available to the department or the authority are not adequate to verify the child's eligibility, the department or the authority may require the child or the child's caretaker to provide additional documentation in accordance with ORS 411.400 and 411.402. Information requested or obtained by the department or the authority under this subsection is subject to the requirements of ORS 410.150 and 413.175.**

SECTION 3. The Oregon Health Authority, in collaboration with the Department of Consumer and Business Services if necessary, shall seek any federal approval or waivers of federal requirements necessary to maximize federal financial participation in the costs of carrying out the amendments to ORS 413.201 and 414.231 by sections 1 and 2 of this 2017 Act, but the amendments to ORS 413.201 and 414.231 by sections 1 and 2 of this 2017 Act are not contingent upon receipt of federal approval or waivers of federal requirements.

SECTION 4. In addition to and not in lieu of any other appropriation, there is appropriated to the Oregon Health Authority, for the biennium beginning July 1, 2017, out of the General Fund, the amount of \$36,113,214, which may be expended for carrying out the amendments to ORS 413.201 and 414.231 by sections 1 and 2 of this 2017 Act.

SECTION 5. Section 3 of this 2017 Act and the amendments to ORS 413.201 and 414.231 by sections 1 and 2 of this 2017 Act become operative on January 1, 2018.

SECTION 6. This 2017 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2017 Act takes effect on its passage.

Passed by Senate July 3, 2017

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Lori L. Brocker, Secretary of Senate

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Peter Courtney, President of Senate

Passed by House July 7, 2017

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Tina Kotek, Speaker of House

Received by Governor:

.....M,....., 2017

Approved:

.....M,....., 2017

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Kate Brown, Governor

Filed in Office of Secretary of State:

.....M,....., 2017

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Dennis Richardson, Secretary of State