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WEST VIRGINIA LEGISLATURE

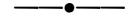
SECOND REGULAR SESSION, 2010

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ENROLLED

House Bill No. 4373

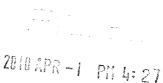
(By Delegates Cann, Eldridge, Guthrie, Hat eld, Lawrence, Mahan, Manypenny, Michael, C. Miller, Perdue and Phillips)



Passed March 12, 2010

In Effect Ninety Days From Passage

ENROLLED



H. B. 4373

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(BY DELEGATES CANN, ELDRIDGE, GUTHRIE, HATFIELD, LAWRENCE, MAHAN, MANYPENNY, MICHAEL, C. MILLER, PERDUE AND PHILLIPS)

[Passed March 12, 2010; in effect ninety days from passage.]

AN ACT to amend and reenact §5-16B-6d of the Code of West Virginia, 1931, as amended, regarding the eligibility of uninsured children to receive insurance under the Children's Health Insurance Program; eliminating the period of potential ineligibility of an uninsured child to receive insurance under the Children's Health Insurance Program if they were previously insured by an employer sponsored insurance plan.

Be it enacted by the Legislature of West Virginia:

That §5-16B-6d of the Code of West Virginia, 1931, as amended, be amended and reenacted to read as follows:

ARTICLE 16B. WEST VIRGINIA CHILDREN'S HEALTH INSURANCE PROGRAM.

§5-16B-6d. Modified benefit plan implementation.

- 1 (a) Upon approval by the Centers for Medicare and
- 2 Medicaid Services, the board shall implement a benefit plan for
- 3 uninsured children of families with income between two
- 4 hundred and three hundred percent of the federal poverty level.

Enr. H.B. 4373]

(b) The benefit plans offered pursuant to this section shall
include services determined to be appropriate for children,
but may vary from those currently offered by the board.

8 (c) The board shall structure the benefit plans for this 9 expansion to include premiums, coinsurance or copays and 10 deductibles. The board shall develop the cost sharing features 11 in such a manner as to keep the program fiscally stable 12 without creating a barrier to enrollment. Such features may 13 include different cost-sharing features within this group 14 based upon the percentage of the federal poverty level.

(d) Provider reimbursement schedules shall be no lower
than the reimbursement provided for the same services under
the plans offered in article sixteen of this chapter.

(e) All provisions of this article are applicable to thisexpansion unless expressly addressed in this section.

20 (f) Nothing in this section may be construed to require 21 any appropriation of State General Revenue Funds for the 22 payment of any benefit provided pursuant to this section, 23 except for the state appropriation used to match the federal 24 financial participation funds. In the event that federal funds 25 are no longer authorized for participation by individuals 26 eligible at income levels above two hundred percent, the 27 board shall take immediate steps to terminate the expansion 28 provided for in this section and notify all enrollees of such 29 termination. In the event federal appropriations decrease for 30 the programs created pursuant to Title XXI of the Social 31 Security Act of 1997, the board is directed to make those 32 decreases in this expansion program before making changes 33 to the programs created for those children whose family 34 income is less than two hundred percent of the federal 35 poverty level.

36 (g) The board is directed to report no less than quarterly
37 to the Legislative Oversight Commission on Health and
38 Human Resources Accountability on the development,
39 implementation and progress of the expansion authorized in
40 this section.

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That Joint Committee on Enrolled Bills hereby certifies that the foregoing foill is correctly enrolled.

airman Senate Committee Will

Chairman House Committee

Originating in the House.

In effect ninety days from passage.

Clerk of the Senate

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Clerk of the House of Delegates ent of the Senate

Speaker of the House of Delegates

The within is approved this the_ day of _ 2010. Gov**b**mor

PRESENTED TO THE GOVERNOR

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