## Stricken language would be deleted from and underlined language would be added to present law. Act 3 of the First Extraordinary Session

1	State of Arkansas	A Bill	Call Item 4
2	91st General Assembly	A DIII	
3	First Extraordinary Session, 2017		HOUSE BILL 1003
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5	By: Representative Gillam		
6	By: Senator J. Dismang		
7	E	A . A . 4 T. D. E . 441. J	
8		or An Act To Be Entitled	
9		THE ARKANSAS WORKS ACT OF 2016 T	
10		LIGIBILITY LIMITS IN THE ARKANSAS	
11		O ONE HUNDRED PERCENT (100%) OF T	
12		LEVEL AND IMPOSE WORK REQUIREMEN	
13		UALS ENROLLED IN THE ARKANSAS WOR	
14	,	OW ARKANSAS THE FLEXIBILITY TO SE	LECT
15		ME AN "ASSESSMENT STATE" OR A	AND
16		STATE"; TO DECLARE AN EMERGENCY;	AND
17	FOR OTHER PURPOS	5E5.	
18 19			
20		Subtitle	
21	TO AMEND A	RKANSAS WORKS TO REDUCE INCOME	
22		Y LIMITS AND IMPOSE WORK	
23		TS; TO ALLOW THE FLEXIBILITY TO	
24	•	THER TO BECOME AN "ASSESSMENT	
25		A "DETERMINATION STATE"; AND TO	
26		EMERGENCY.	
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29	BE IT ENACTED BY THE GENERAL	L ASSEMBLY OF THE STATE OF ARKANS	SAS:
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31	SECTION 1. DO NOT CO	DIFY. <u>Legislative findings and i</u>	ntent.
32	(a) The General Asser	mbly finds that:	
33	(1) The State of	of Arkansas continues to seek str	ategies to
34	provide health insurance for	r low-income and other vulnerable	populations in a
35	manner that will encourage p	personal responsibility and enhan	ice program
36	integrity:		

T	(2) Arkansas recognizes the continued need to promote employment
2	among beneficiaries of public assistance programs by providing those
3	beneficiaries with the tools to achieve economic advancement;
4	(3) Arkansas continues to support the flexibility within § 23-
5	61-1004(h) that authorizes the Governor to "request a block grant under
6	relevant federal law and regulations for the funding of the Arkansas Medicaid
7	Program as soon as practical if the federal law or regulations change to
8	allow the approval of a block grant for this purpose";
9	(4) On March 6, 2017, Governor Asa Hutchinson announced
10	additional reforms to the Arkansas Works Program to further support
11	efficiency and sustainability of the health insurance coverage provided under
12	the Arkansas Works Program by:
13	(A) Establishing a work requirement for certain
14	beneficiaries of the Arkansas Works Program to encourage beneficiaries to
15	work and to support beneficiaries in the process of returning to the
16	workforce;
17	(B) Capping eligibility for the Arkansas Works Program at
18	one hundred percent (100%) of the federal poverty level; and
19	(C) Returning control of the eligibility process to the
20	state by allowing the state the flexibility to determine whether the state
21	would be an "assessment state" or a "determination state"; and
22	(5)(A) To avoid variations in enrollment within a Medicaid
23	program based on an eligibility determination of a federally facilitated
24	marketplace, Arkansas needs the flexibility to select whether to become an
25	"assessment state" or a "determination state" in order to strengthen the
26	integrity of the Medicaid Eligibility Verification System.
27	(B) However, the Medicaid Eligibility Verification System
28	established by Acts 2013, No. 1265, requires that the eligibility
29	determination made by the federally facilitated marketplace be accepted by
30	the Department of Human Services, which makes Arkansas a "determination
31	state" for the purposes of eligibility determination by a federally
32	<u>facilitated marketplace.</u>
33	(b) It is the intent of the General Assembly to:
34	(1) Implement reforms to the Arkansas Works Program to further
35	support efficiency and sustainability of the health insurance provided under
36	the Arkansas Works Program: and

1	(2) Repeal §§ $20-7/-2101$ and $20-7/-2103$ to allow Arkansas the
2	flexibility to select whether to become an "assessment state" or a
3	"determination state" in order to strengthen the integrity of the Medicaid
4	Eligibility Verification System.
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6	SECTION 2. DO NOT CODIFY. TEMPORARY LANGUAGE. Arkansas Works Program
7	modifications.
8	(a) The Department of Human Services shall submit a state plan
9	amendment or waiver, or both, to the Centers for Medicare and Medicaid
10	Services that establishes:
11	(1) Income eligibility at an amount equal to or less than one
12	hundred percent (100%) of the federal poverty level, inclusive of the income
13	disregard under 42 C.F.R. § 435.603(d)(4), as it existed on January 1, 2017;
14	<u>and</u>
15	(2) A work requirement for eligible individuals with exemptions
16	for certain activities and conditions.
17	(b) The income eligibility standard and the work requirement under
18	subsection (a) of this section shall be effective on and after:
19	(1) January 1, 2018; or
20	(2) The date of occurrence of the later of the following if one
21	(1) or both actions have not occurred by January 1, 2018:
22	(A) Approval of the state plan amendment or waiver, or
23	both, under subsection (a) of this section from the Centers for Medicare and
24	Medicaid Services; and
25	(B) The approval and adoption of rules under § 10-3-309
26	and the Arkansas Administrative Procedure Act, § 25-15-201 et seq., that are
27	necessary to implement the income eligibility standards and work requirements
28	under this section.
29	
30	SECTION 3. DO NOT CODIFY. TEMPORARY LANGUAGE. Small employer health
31	insurance coverage study.
32	(a) The Department of Human Services, in coordination with the State
33	Insurance Department and the Department of Workforce Services, shall study
34	and analyze small employer health insurance coverage in this state to
35	determine how to strengthen employer-sponsored insurance and help small-
36	business employers offer more affordable health insurance coverage for

1	employees.
2	(b)(1) On or before October 1, 2018, the Department of Human Services,
3	in coordination with the State Insurance Department and the Department of
4	Workforce Services, shall report on the findings of the study required under
5	subsection (a) of this section to the Legislative Council and the Governor.
6	(2) The report shall include without limitation:
7	(A) Recommendations for legislation to address the need of
8	small-business employers in relation to health insurance coverage for their
9	employees; and
10	(B) Options for new programs to strengthen employer-
11	sponsored insurance and help small-business employers offer more affordable
12	health insurance coverage for employees.
13	
14	SECTION 4. Arkansas Code § 23-61-1003(10), concerning the definition
15	of "program participant" within the Arkansas Works Act of 2016, is amended to
16	read as follows:
17	(10) "Program participant" means an eligible individual who:
18	(A) Is at least nineteen (19) years of age and no more
19	than sixty-four (64) years of age with an income that <del>is equal to or less</del>
20	than one hundred thirty-eight percent (138%) of the federal poverty level
21	meets the income eligibility standards established by rule of the Department
22	of Human Services;
23	(B) Is authenticated to be a United States citizen or
24	documented qualified alien according to the Personal Responsibility and Work
25	Opportunity Reconciliation Act of 1996, Pub. L. No. 104-193;
26	(C) Is not eligible for Medicare or advanced premium tax
27	credits through the health insurance marketplace; and
28	(D) Is not determined to be more effectively covered
29	through the traditional Arkansas Medicaid Program, including without
30	limitation:
31	(i) An individual who is medically frail; or
32	(ii) An individual who has exceptional medical needs
33	for whom coverage offered through the health insurance marketplace is
34	determined to be impractical, overly complex, or would undermine continuity
35	or effectiveness of care; and

1	SECTION 5. Effective December 31, 2017, Arkansas Code § 23-61-1004(b),
2	concerning the administration of the Arkansas Works Program, is amended to
3	read as follows:
4	(b) Health insurance benefits under this subchapter shall be provided
5	through:
6	(1) Individual premium assistance for enrollment of Arkansas
7	Works Program participants in individual qualified health insurance plans;
8	<u>and</u>
9	(2) Employer-sponsored premium assistance for certain eligible
10	individuals who enroll in employer health insurance coverage; and
11	(3) Supplemental benefits to incentivize personal
12	responsibility.
13	
14	SECTION 6. Arkansas Code § 23-61-1008, concerning insurance standards
15	for employer health insurance coverage, is amended to add an additional
16	subsection to read as follows:
17	(g)(1) This section shall expire on December 31, 2017.
18	(2) The Arkansas Code Revision Commission shall remove this
19	section from the Arkansas Code after December 31, 2017.
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21	SECTION 7. Arkansas Code § 20-77-2101 is repealed.
22	20-77-2101. Definitions.
23	As used in this subchapter:
24	(1) "Arkansas Data Services Hub" means the Arkansas data
25	services hub that provides an electronic method to verify:
26	(A) Age, residency, and child support information via the
27	Department of Finance and Administration;
28	(B) Age, marriage, and death information via the Division
29	of Vital Records of the Department of Health;
30	(C) Age, Social Security number, citizenship, and Medicare
31	coverage information via the state online portal to the Social Security
32	Administration;
33	(D) Employment earnings and unemployment benefit payment
34 25	information via the Department of Workforce Services; and
35	(E) Receipt of Supplemental Nutrition Assistance Program
36	benefits:

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1	(2) "Federal Data Services Hub" means the federal data services
2	hub that provides an electronic method to verify:
3	(A) Social Security number verification via the Social
4	Security Administration;
5	(B) Citizenship verification via the Social Security
6	Administration;
7	(C) Incarceration verification via the Social Security
8	Administration;
9	(D) Verification of income under Title II of the Social
10	Security Act, 42 U.S.C. § 401 et seq., via the Social Security
11	Administration;
12	(E) Quarters of coverage information via the Social
13	Security Administration;
14	(F) Modified adjusted gross income information via the
15	Internal Revenue Service;
16	(G) Immigration status verification via the United States
17	Department of Homeland Security;
18	(H) Indicators for lawful presence, qualified noncitizen,
19	and five-year bar status via the United States Department of Homeland
20	Security; and
21	(I) Public minimum essential coverage;
22	(3)(A) "Medicaid eligible" means an individual who is eligible
23	for Medicaid benefits.
24	(B) "Medicaid eligible" does not include establishment of
25	an entitlement to a particular benefit package or the reimbursement of
26	particular medical assistance; and
27	(4) "Supplemental manual verification investigation" means an
28	investigation conducted by the Department of Human Services or its designee
29	to gather information by methods such as contacting family members,
30	employers, and medical facilities to verify information received via the
31	Medicaid Eligibility Verification System.
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33	SECTION 8. Arkansas Code § 20-77-2102 is amended to read as follows:
34	20-77-2102. Medicaid Eligibility Verification System — <u>Definitions</u> .
35	(a) The Department of Human Services shall establish and maintain the
36	Medicaid Eligibility Verification System that is designed to prevent fraud in

1	the establishment and maintenance of Medicaid eligibility.
2	(b)(l) In establishing the Medicaid Eligibility Verification System,
3	the department shall have the flexibility to determine whether the state
4	shall be an "assessment state" or a "determination state" for purposes of
5	Medicaid eligibility determinations by the federally facilitated marketplace.
6	(2) As used in this subsection:
7	(A) "Assessment state" means a state with a federally
8	facilitated marketplace that can elect to have the federally facilitated
9	marketplace make assessments of Medicaid eligibility and then transfer the
10	account of an individual to the state Medicaid agency for a final
11	determination; and
12	(B) "Determination state" means a state that requires the
13	eligibility determination made by the federally facilitated marketplace to be
14	accepted by the state Medicaid agency.
15	
16	SECTION 9. Arkansas Code § 20-77-2103 is repealed.
17	20-77-2103. Medicaid Eligibility Verification System - Requirements.
18	(a) Beginning concurrently with the establishment of live, full-time
19	operation of the Federal Data Services Hub and the Arkansas Data Services
20	Hub, the Department of Human Services shall deploy an automated eligibility
21	verification system that electronically queries the Federal Data Services Hub
22	and the Arkansas Data Services Hub under this subchapter.
23	(b) The department shall electronically query the Federal Data
24	Services Hub upon receiving a Medicaid application and to the extent
25	permitted by the Federal Data Services Hub for purposes of Medicaid
26	eligibility renewal.
27	(c) If the Medicaid eligibility or continued Medicaid eligibility of
28	an individual can be determined based on information received via the Federal
29	Data Services Hub, the department shall determine eligibility and notify the
30	applicant or recipient.
31	(d) If the Medicaid eligibility or continued eligibility of an
32	individual cannot be determined based on information received via the Federal
33	Data Services Hub, the department shall electronically query the Arkansas
34	Data Services Hub and determine whether the information received from each
35	data services hub is:
36	(1) Reasonably compatible and establishes that the individual is

1	Medicaid-eligible;
2	(2) Reasonably compatible and establishes that the individual is
3	not Medicaid-eligible; or
4	(3) Not reasonably compatible.
5	(e) If the information received from the Federal Data Services Hub and
6	the Arkansas Data Services Hub is reasonably compatible, the department shall
7	enter an eligibility determination and inform the applicant or recipient of
8	the decision.
9	(f)(1) If the information received from the Federal Data Services Hub
10	and Arkansas Data Services Hub is not reasonably compatible, the department
11	shall conduct a supplemental manual verification investigation.
12	(2) At the conclusion of the supplemental manual verification
13	investigation, the department shall enter an eligibility determination and
14	inform the applicant or recipient of the decision.
15	(g) The department may adopt rules to implement this subchapter.
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17	SECTION 10. EFFECTIVE DATE.
18	Section 5 of this act is effective on and after December 31, 2017.
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20	SECTION 11. EMERGENCY CLAUSE. It is found and determined by the
21	General Assembly of the State of Arkansas that this act requires that the
22	Department of Human Services submit a state plan amendment or waiver, or
23	both, to the Centers for Medicare and Medicaid Services; that the state plan
24	amendment or waiver, or both, impacts certain individuals who are presently
25	enrolled in the Arkansas Works Program; and that this act is immediately
26	necessary because the Department of Human Services needs to be able to make
27	the state plan amendment request or waiver request, or both, at the earliest
28	possible date to ensure certainty in the requirements of the Arkansas Works
29	Program. Therefore, an emergency is declared to exist, and this act being
30	immediately necessary for the preservation of the public peace, health, and
31	safety shall become effective on:
32	(1) The date of its approval by the Governor;
33	(2) If the bill is neither approved nor vetoed by the Governor,
34	the expiration of the period of time during which the Governor may veto the
35	bill; or
36	(3) If the hill is vetoed by the Covernor and the veto is

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1	overridgen, the date the last house overrides the veto.
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