

HOUSE BILL No. 1091

DIGEST OF HB 1091 (Updated January 17, 2023 10:14 am - DI 140)

Citations Affected: IC 12-15; IC 12-17.6; noncode.

Synopsis: Continuous eligibility under Medicaid and CHIP. Changes the requirements for submitting eligibility information for an individual who is: (1) less than 19 years of age; and (2) a recipient of either the Medicaid program or the children's health insurance program (CHIP) (programs). (Current law concerning the submission of eligibility information in the programs applies to individuals less than three years of age.)

Effective: July 1, 2023.

Vermilion, Clere

January 9, 2023, read first time and referred to Committee on Public Health. January 17, 2023, reported — Do Pass. Referred to Committee on Ways and Means pursuant to Rule 127.



First Regular Session of the 123rd General Assembly (2023)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2022 Regular Session of the General Assembly.

HOUSE BILL No. 1091

A BILL FOR AN ACT to amend the Indiana Code concerning human services.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 12-15-2-15.8, AS ADDED BY P.L.218-20	
SECTION 10, IS AMENDED TO READ AS FOLLOWS [EFFECT.	IVE
JULY 1, 2023]: Sec. 15.8. After an individual who is less than three	(3)
nineteen (19) years of age is determined to be eligible for Medic	caid
under section 14 of this chapter, the individual is not required to sub	mit
eligibility information more frequently than once in a twelve ((12)
month period until the child becomes three (3) nineteen (19) year	s of
age.	
SECTION 2. IC 12-17.6-3-3, AS AMENDED BY P.L.218-20	007,
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SECTION 2. IC 12-17.6-3-3, AS AMENDED BY P.L.218-2007, SECTION 42, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2023]: Sec. 3. (a) Subject to subsections (b) and (c), a child who is eligible for the program shall receive services from the program until the earlier of the following:

- (1) The child becomes financially ineligible.
- (2) The child becomes nineteen (19) years of age.
- (b) Subsection (a) applies only if the child and the child's family comply with enrollment requirements.

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- SECTION 3. [EFFECTIVE JULY 1, 2023] (a) Before September 1,2023, the office of the secretary of family and social services shall apply for any state plan amendment or Medicaid waiver necessary to change the age set forth in IC 12-15-2-15.8, as amended by this act, concerning continuous eligibility for the Medicaid program from a Medicaid recipient who is less than three (3) years of age to a Medicaid recipient who is less than nineteen (19) years of age.
- (b) Before September 1, 2023, the office of Medicaid policy and planning shall apply for any federal approval necessary to change the age set forth in IC 12-17.6-3-3, as amended by this act, concerning continuous eligibility for the children's health insurance program from a recipient who is less than three (3) years of age to a recipient who is less than nineteen (19) years of age.
 - (c) This SECTION expires December 31, 2023.



COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1091, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

(Reference is to HB 1091 as introduced.)

BARRETT

Committee Vote: Yeas 12, Nays 0

