

§3174-Q. Medicaid stability

1. Legislative authorization. Except as provided in subsection 2, the department, in its administration of the Medicaid program and the federal State Children's Health Insurance Program or any successor program, shall obtain authorization from the Legislature by proper enactment of law before:

A. Implementing changes in eligibility for the Medicaid program that are reasonably likely to cause a decrease in excess of 10% in the percentages of enrollment in any covered group during any year or over any 5-year period unless individuals losing eligibility in a covered group are eligible in any other covered group with substantially similar or greater coverage; [PL 2019, c. 266, §1 (NEW).]

B. Eliminating, having the effect of significantly limiting or significantly reducing eligibility for a category of service covered under the Medicaid program or the federal State Children's Health Insurance Program without comparable service provided in its place; [PL 2019, c. 266, §1 (NEW).]

C. Accepting a block grant or any other fundamental alteration in the method of federal funding for the Medicaid program that could result in a substantial decrease in total funding for the program; or [PL 2019, c. 266, §1 (NEW).]

D. Applying for or amending a waiver, including a waiver pursuant to Section 1115 of the Social Security Act, or adopting a state plan amendment that could significantly reduce the scope of services of or eligibility for the Medicaid program or the federal State Children's Health Insurance Program. [PL 2019, c. 266, §1 (NEW).]

[PL 2019, c. 266, §1 (RPR).]

2. Exceptions in the event of federal law changes. If an action must be taken by the department to comply with federal law and obtaining authorization from the Legislature cannot be achieved timely to comply with federal requirements, the department may act only to the extent necessary to achieve compliance with federal law, pending further action of the Legislature under this section.

[PL 2019, c. 266, §1 (RPR).]

3. Failure to comply. A person may not be denied eligibility for the Medicaid program or the federal State Children's Health Insurance Program as the result of a change to those programs as described in subsections 1 and 2 if the department failed to comply with this section.

[PL 2019, c. 266, §1 (NEW).]

SECTION HISTORY

PL 1995, c. 696, §B2 (NEW). PL 2009, c. 571, Pt. PPP, §1 (AMD). PL 2019, c. 266, §1 (RPR).

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