

Chief Patron: Marshall, Robert

Item 301 #18h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 262, strike lines 6 through 8.

**Explanation:**

(This amendment eliminates language in the introduced bill which was adopted by the 2013 General Assembly to allow for the sum sufficient appropriation of nongeneral funds to implement coverage for newly eligible individuals pursuant to 42 U.S.C. § 1396d(y)(1)[2010] of the Patient Protection and Affordable Care Act in the event the Medicaid Innovation and Reform Commission determines that the Medicaid reform conditions set out in this item have been met and it approves Medicaid expansion.)

---

Chief Patron: Marshall, Robert

Item 301 #19h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 263, line 48, after "changes.", insert:

", provided that the department may not expand Medicaid to implement coverage for newly eligible individuals pursuant to 42 U.S.C. § 1396d(y)(1)[2010] of the Patient Protection and Affordable Care Act."

**Explanation:**

(This amendment adds language to the introduced bill to ensure that regulatory changes resulting from amendments to the State Plan for Medical Assistance related to the federal Patient Protection and Affordable Care Act (PPACA) eligibility determination requirements including the Modified Adjusted Gross Income (MAGI) methodology, case management standards and practices, and the process for administrative appeals of MAGI-related eligibility determinations may not take place if such changes include Medicaid expansion under the PPACA.)

---

Chief Patron: Cline

Item 301 #20h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 262, strike lines 6 through 8.

**Explanation:**

(This amendment eliminates language in the introduced bill which was adopted by the 2013 General Assembly to allow for the sum sufficient appropriation of nongeneral funds to implement coverage for newly eligible individuals pursuant to 42 U.S.C. § 1396d(y)(1)[2010] of the Patient Protection and Affordable Care Act in the event the Medicaid Innovation and Reform Commission determines that the Medicaid reform conditions set out in this item have been met and it approves Medicaid expansion.)

---

Chief Patron: Toscano

Item 467 #6h

**Central Appropriations**

Central Appropriations

Language

**Language:**

Item 467, Page 404, after line 38, insert:

“S. From such general fund revenues as are collected in fiscal year 2015 in excess of the First Year Official Revenue Estimate contained in this Act ,the first \$34,000,000, or portion thereof, that is not required to meet (i) the Constitutionally-mandated deposit to the Revenue Stabilization Fund or (ii) the Water Quality Improvement Fund, Part A deposit, is hereby appropriated to provide an additional 1 percent salary increase for state funded K-12 Standards of Quality instructional and support positions effective September 1, 2015. It is the intent of the General Assembly that this one percent, effective September 1, 2015, would be in addition to the one percent pay raise authorized in Item 136.”

**Explanation:**

(This amendment is self-explanatory.)

---

Chief Patron: Marshall, Robert

Item 4-5.03 #1h

## **Special Conditions and Restrictions on Expenditures**

Services and Clients

Language

### **Language:**

Page 478, strike lines 2 through 12.

### **Explanation:**

(This amendment eliminates language in the introduced budget which would have provided for a sunset on June 30, 2016 of any amendments to the Medicaid State Plan to implement Medicaid expansion pursuant to the federal Patient Protection and Affordable Care Act (PPACA), notwithstanding language contained in Item 301 which allows for such expansion if certain provisions have been met. There are no provisions in the federal PPACA, regulations promulgated by the U.S. Department of Health and Human Services, or any actions by the Chief Executive of the United States, to provide for a provisional expansion of the Medicaid program allowing a state to unilaterally withdraw from Medicaid expansion.")

---