
VIRGINIA STATE BUDGET

2009 Session

Budget Bill - SB850 (Introduced)

Bill Order » Office of Health and Human Resources » Item 305

Department of Medical Assistance Services

Item 305

First Year - FY2009 Second Year - FY2010

Children's Health Insurance Program Delivery (44600)	\$117,489,589	\$135,050,067
	\$126,986,191	\$149,427,415
Reimbursements for Medical Services Provided Under the Family Access to Medical Insurance Security Plan (44602)	\$117,489,589	\$135,050,067
	\$126,986,191	\$149,427,415
Fund Sources:		
General	\$27,055,729	\$33,201,896
	\$30,379,540	\$38,233,968
Dedicated Special Revenue	\$14,065,627	\$14,065,627
Federal Trust	\$76,368,233	\$87,782,544
	\$82,541,024	\$97,127,820

Authority: Title 32.1, Chapter 13, Code of Virginia.

A. Pursuant to Chapter 679, Acts of Assembly of 1997, the State Corporation Commission shall annually, on or before June 30, 1998, and each year thereafter, calculate the premium differential between: (i) 0.75 percent of the direct gross subscriber fee income derived from eligible contracts and (ii) the amount of license tax revenue generated pursuant to subdivision A 4 of § 58.1-2501 for the immediately preceding taxable year and notify the Comptroller of the Commonwealth to transfer such amounts to the Family Access to Medical Insurance Security Plan Trust Fund as established on the books of the Comptroller.

B. As a condition of this appropriation, revenues from the Family Access to Medical Insurance Security Plan Trust Fund, shall be used to match federal funds for the State Children's Health Insurance Program.

C. Every eligible applicant for health insurance as provided for in Title 32.1, Chapter 13, Code of Virginia, shall be enrolled and served in the program. To the extent that appropriations in this Item are insufficient, the Director, Department of Planning and Budget shall transfer general fund appropriations from Items 306 and 310 into this Item, to be used as state match for federal Title XXI funds.

D. Effective July 1, 2009, the Department of Medical Assistance Services shall have the authority to amend the Family Access to Medical Insurance Security Plan and related regulations to expand medical coverage to pregnant women who are over the age of 19 who are ineligible for Medicaid and have annual family income less than or equal to 200 percent of the Federal Poverty Level and to simplify the administration of the premium assistance program available to families with children eligible for FAMIS who have access to an employer-sponsored health insurance program. The medical coverage period shall apply to a woman during her pregnancy and extend no longer than the end of the month in which her 60-day postpartum period ends. Services provided during this coverage period shall include all services in the FAMIS State Plan with the exception of the Early Periodic Screening Diagnosis and Treatment Program. The department will continue to ensure the cost effectiveness of the premium assistance program.

E. The Department of Medical Assistance Services shall have the authority to provide eligibility in the Family

Access to Medical Insurance Security (FAMIS) Plan to infants born to mothers enrolled in FAMIS, for the month of birth plus two additional months, even if eligibility is not yet established for the newborn. If federal funds are not available for those months of eligibility, the department shall use state funding. The department shall promulgate emergency regulations to implement this amendment within 280 days or less from the enactment of this act.

F. Beginning with the June 2009 monthly capitation payment to managed care organizations, the Department of Medical Assistance Services shall make payment for the member months of each month in the first week of the subsequent month. The department shall have the authority to implement this reimbursement schedule change effective upon passage of this act, and prior to the completion of any regulatory process undertaken in order to effect such change.

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