

House Bill 1013

By: Representatives Buckner of the 137th, Gardner of the 57th, Oliver of the 82nd, Williams of the 37th, Schofield of the 60th, and others

A BILL TO BE ENTITLED
AN ACT

1 To amend Chapter 4 of Title 49 of the Official Code of Georgia Annotated, relating to public
2 assistance, so as to establish the PeachCare for Adults Program; to provide for a short title;
3 to provide for definitions; to provide for submission of federal waiver requests; to provide
4 for requirements; to provide for providers; to provide for administration of the program; to
5 provide for rules and regulations; to provide for related matters; to repeal conflicting laws;
6 and for other purposes.

7 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

8 **SECTION 1.**

9 Chapter 4 of Title 49 of the Official Code of Georgia Annotated, relating to public assistance,
10 is amended by adding a new article to read as follows:

11 "ARTICLE 10

12 49-4-200.

13 This article shall be known and may be cited as the 'PeachCare for Adults Act.'

14 49-4-201.

15 As used in this article, the term:

16 (1) 'Board' means the Board of Community Health.

17 (2) 'Department' means the Department of Community Health.

18 (3) 'Eligible person' means an individual between and including the ages of 19 and 64
19 years who has income less than or equal to 133 percent of the federal poverty level and
20 who is not enrolled in Medicaid.

21 (4) 'Enrolled person' means an eligible person who is enrolled in the PeachCare for
22 Adults Program.

23 (5) 'Medicaid' means the program of medical assistance conducted pursuant to Article 7
 24 of this chapter, the 'Georgia Medical Assistance Act of 1977.'

25 (6) 'PeachCare for Adults Program' or 'program' means the program for health coverage
 26 established pursuant to this article.

27 49-4-202.

28 (a) In order to implement the PeachCare for Adults Program pursuant to this article, the
 29 board shall submit:

30 (1) Any waiver request to the Centers for Medicare and Medicaid Services of the United
 31 States Department of Health and Human Services pursuant to Section 1115 of the federal
 32 Social Security Act necessary to add coverage for adults between and including the ages
 33 of 19 and 64 years with incomes less than or equal to 133 percent of the federal poverty
 34 level; and

35 (2) Any waiver request to the secretary of health and human services of the United States
 36 and the secretary of the treasury of the United States necessary for waiver of applicable
 37 provisions under Section 1332 of the federal Patient Protection and Affordable Care Act
 38 (P.L. 111-148).

39 (b) The board shall take all necessary steps to secure the enhanced federal match available
 40 under the applicable provisions of Section 2001 of the federal Patient Protection and
 41 Affordable Care Act (P.L. 111-148).

42 (c) The board shall submit all necessary waiver requests pursuant to this Code section no
 43 later than January 1, 2020.

44 49-4-203.

45 (a) The department shall establish the PeachCare for Adults Program. Such program shall
 46 be implemented no later than January 1, 2021.

47 (b) The program shall include, at a minimum:

48 (1) The same coverage provided to recipients of Medicaid, including, but not limited to,
 49 the essential health benefits as provided in 42 U.S.C. Section 18022; provided, however,
 50 that maternity and newborn care benefits shall be extended for one year after birth;

51 (2) Any health care benefits specified in the federal Patient Protection and Affordable
 52 Care Act (P.L. 111-148) with respect to health insurance coverage or health insurance
 53 products; and

54 (3) Coverage for all vaccinations recommended for children and for adults by the
 55 Advisory Committee on Immunization Practices of the federal Centers for Disease
 56 Control and Prevention.

57 (c) Only eligible persons may enroll in the program.

58 (d) The program shall include an affordability scale based on income for premiums for
59 enrolled persons with incomes greater than 100 percent of the federal poverty level.
60 Enrolled persons with incomes less than or equal to 100 percent of the federal poverty level
61 shall not be charged premiums.

62 (e) Enrollment in the program shall not be contingent on work requirements.

63 (f) The department shall publish in print or electronically an annual report, a copy of which
64 shall be provided to the Governor, setting forth the number of enrolled persons in the
65 program, the health services provided, the amount of money paid to providers, and other
66 pertinent information with respect to the administration of the program. The department
67 shall not be required to distribute copies of the annual report to the members of the General
68 Assembly but shall notify such members of the availability of the report in the manner
69 which it deems to be most effective and efficient.

70 49-4-204.

71 (a) Any health care provider that is a Medicaid provider shall be deemed to be a provider
72 in the program.

73 (b) Health care provider reimbursement rates shall be based on the Medicaid fee schedule.
74 Contingent upon available funds, the department may increase reimbursement rates for
75 health care providers.

76 (c) The department, through the Department of Administrative Services or any other
77 appropriate entity, may contract for any or all of the following: the collection of premiums,
78 processing of applications, verification of eligibility, outreach, data services, and
79 evaluation, provided that such contracting achieves administrative or service cost
80 efficiency. The department, and other state agencies, as appropriate, shall provide
81 necessary information to any entity which has contracted with the department for services
82 related to the administration of the program upon request.

83 (d) All state agencies shall cooperate with the department and its designated agents by
84 providing requested information to assist in the administration of the program.

85 (e) As necessary to enforce the provisions of this article, the department or its duly
86 authorized agents may submit to the state revenue commissioner the names of applicants
87 for health care benefits or payments provided under this article, as well as the relevant
88 income threshold specified therein. If the department elects to contract with the state
89 revenue commissioner for such purposes, the state revenue commissioner or his or her
90 agents or employees shall notify the department of whether or not each submitted
91 applicant's income exceeds the relevant income threshold provided. The department shall
92 pay the state revenue commissioner for all costs incurred by the Department of Revenue
93 pursuant to this subsection. No information shall be provided by the Department of

94 Revenue to the department without an executed cooperative agreement between such
95 departments. Any tax information secured from the federal government by the Department
96 of Revenue pursuant to express provisions of Section 6103 of the Internal Revenue Code
97 shall not be disclosed by the Department of Revenue pursuant to this subsection. Any
98 person receiving any tax information under the authority of this subsection is subject to the
99 provisions of Code Section 48-7-60 and to all penalties provided under Code Section
100 48-7-61 for unlawful divulging of confidential tax information.

101 49-4-205.

102 The department shall be authorized to promulgate rules and regulations consistent with and
103 necessary to carry out the provisions of this article."

104 **SECTION 2.**

105 All laws and parts of laws in conflict with this Act are repealed.