HB 910 INTRODUCED BY WINSLOW REQUIRING STATE-ASSUMED COUNTIES TO SHARE COSTS OF MEDICAL ASSISTANCE

4/06	INTRODUCED	
4/06	REFERRED TO TAXATION	
4/06	FISCAL NOTE REQUESTED	
4/07	REREFERRED TO APPROPRIATIONS	
4/08	HEARING	
4/09	COMMITTEE REPORTBILL PASSED AS AMENDED	
4/11	FISCAL NOTE RECEIVED	
4/13	2ND READING PASSED 50	49
4/14	3RD READING PASSED 53	47

TRANSMITTED TO SENATE

DIED IN PROCESS

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INTRODUCED BY Winds

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A BILL FOR AN ACT ENTITLED: "AN ACT REQUIRING COUNTIES WITH STATE-ASSUMED WELFARE SERVICES TO MATCH EXPENDITURES FOR GENERAL RELIEF MEDICAL ASSISTANCE; AUTHORIZING THESE COUNTIES TO INCREASE THEIR MILL LEVY FOR WELFARE SERVICES; ALLOWING COUNTY COMMISSIONERS TO ADOPT RULES FOR DETERMINING ELIGIBILITY FOR GENERAL RELIEF MEDICAL ASSISTANCE; AMENDING SECTIONS 53-2-812, 53-2-813, AND 53-3-206, MCA; AND PROVIDING AN EFFECTIVE DATE AND AN APPLICABILITY DATE."

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

section 1. Section 53-2-812, MCA, is amended to read:

"53-2-812. State assumption -- permanent transfer to
department -- exceptions. (1) A county opting for state
assumption does so on a complete and permanent basis, unless
the county requests to retain or reassume responsibility for
medical assistance or monetary payments to needy persons as
provided in Title 53, chapter 3, pursuant to the adoption of
a resolution or ordinance as provided in 53-2-811(2) and
notice to the department as provided in 53-2-811(3). Under
such a retention or reassumption, staff personnel continue
under the supervision and control of the department but the
department may contract with the counties for the operation

of programs provided in Title 53, chapter 3. A county may not retain or reassume assistance programs partially funded by the federal government.

- (2) A county transferring all duties and responsibilities to the department may reassume limited responsibility for medical assistance or monetary payments to needy persons as provided in subsection (1) but may not thereafter request full state assumption. A county initially requesting limited state assumption may not thereafter request full state assumption. A county opting for limited or full state assumption does so on a permanent basis, except as provided in this section.
 - (3) The board of county commissioners of a county transferring all duties and responsibilities to the department shall adopt rules for determining eligibility for general relief medical assistance, as provided in 53-3-206."

 Section 2. Section 53-2-813, MCA, is amended to read:
- "53-2-813. Mill levy for counties transferring public
 assistance and protective services. (1) (a) Except as
 provided in subsection (1)(b), for the purpose of this part,
 at least 12 mills must be levied annually in those counties
 opting for state assumption.
 - (b) A county that levied an amount less than 12 mills for purposes of its county poor fund during fiscal year 1982 must levy an equivalent amount to the poor fund mill levy

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- assessed by that county during fiscal year 1982 plus 1.5 1 2 mills, not-to-exceed-a-total-of-12-mills, less a mill levy 3 equivalent to an amount the county can demonstrate was spent 4 during fiscal year 1982 for the building or operation of a 5 medical facility. The reduced mill levy exception provided 6 in this subsection (1)(b) continues in effect until June 30, 7 1984. After that date, at least 12 mills must be levied in 8 all counties where state assumption is in effect.
 - (2) The proceeds of 10 mills of the mill levy established in subsection (1) must be deposited in the state special revenue fund in the state treasury for the purpose of paying the expenses of the department. The mill-levy may not exceed-12-mills,-notwithstanding-actual-expenditures made-by-the-department.

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- (3) For a county retaining or reassuming operational responsibility for <u>all</u> medical assistance or <u>all</u> monetary payments to needy persons as provided in 53-2-812, the levy provided in subsection (1) must be reduced by the mill levy equivalent expended by that county or the department for such purposes in the fiscal year immediately preceding the option to retain or reassume such responsibility."
- Section 3. Section 53-3-206, MCA, is amended to read:
 "53-3-206. Eligibility for general relief medical
 assistance. (1) In order to be considered for eligibility
 for general relief medical assistance, a person must be

- found to have a serious medical condition.
- (2) Eligibility for general relief medical assistance must be determined as provided in this section and 53-3-205.

 A person with a serious medical condition must apply for general relief medical assistance prior to the provision of medical services or within 90 days of the date the medical service is first provided. Eligibility is determined as of the date medical service is first provided.
- (3) All persons who reside in the same residence and are legally related to or responsible for each other are considered to be one household for purposes of determining general relief medical assistance.
- 13 (4) All individual or household resources must be used
 14 to offset medical obligations except those excluded in
 15 53-3-205(7).
- 16 (5) To determine eligibility for county general relief 17 medical assistance, a county welfare board may promulgate 18 rules to establish the circumstances under which persons are 19 unable to pay for their medical aid and hospitalization. 20 However, no household with an income exceeding 300% of the 21 amount set forth in 53-3-205(2) is eligible for such medical 22 assistance.
 - (6) In a county with state-assumed welfare services: the board of county commissioners shall adopt rules to determine eligibility for general relief medical assistance.

1	(7)	In a county with state-assumed welfare services:
2	(a)	covered medical services must be provided at no
3	cost to	the person residing in a household if the average
4	household	monthly income that is reasonably certain to be
5	received	in a 12-month period beginning with the month the
6	medical s	ervice was provided does not exceed the amount in
7	53-3-205(2);

(b) a person is not eligible for medical services if the household in which he resides has an average monthly income reasonably certain to be received in a 12-month period beginning with the month the medical service was provided in excess of that set forth in the following table:

13		Monthly
14	Family Size	Income Level
15	1	\$ 287
16	2	433
17	3	526
18	4	618
19	5	714
20	6	804
21	7	896
22	8	988
23	9	1,081
24	10	1,173
25	11	1,194

1	12	1,215
2	13	1,236
3	14	1,256
4	15	1,277
5	16 or more	1.298

- (c) if the average household monthly income reasonably certain to be received in a 12-month period beginning with the month the medical service was provided is between the amount in 53-3-205(2) and the monthly income level set forth in subsection (b), a household must first incur covered medical costs equal to the difference between its average monthly income and the monthly income standard in 53-3-205(2) before medical assistance is provided.
- (8) A county with state-assumed welfare services must reimburse the department for one-half of the costs of general relief medical assistance in that county. This reimbursement must be deposited in the state special revenue fund in the state treasury for the purpose of paying the expenses of the department.
- (9) A county with state-assumed welfare services is not eligible for an emergency grant under 53-2-323."

<u>NEW SECTION.</u> Section 4. Extension of authority. Any existing authority of the department of social and rehabilitation services to make rules on the subject of the provisions of this act is extended to the provisions of this

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1 act.
2 <u>NEW SECTION.</u> Section 5. Effective date -3 applicability. This act is effective July 1, 1987, and
4 applies to taxable years beginning after December 31, 1987.

-End-

STATE OF MONTANA - FISCAL NOTE

Form BD-15

In compliance with a written request, there is hereby submitted a Fiscal Note for HB910, as introduced.

DESCRIPTION OF PROPOSED LEGISLATION:

An act requiring counties with state-assumed welfare services to match expenditures for general relief medical assistance; authorizing these counties to increase their mill levy revenue for welfare services; allowing county commissioners to adopt rules for determining eligibility for general relief medical assistance; amending sections 53-2-812, 53-2-813, and 53-3-206, MCA; and providing an effective date and an applicability date.

ASSUMPTIONS:

- 1. The distribution of medical costs between state-assumed counties will remain the same in FY88 and FY89 as in FY86.
- 2. Total general relief medical expenditures will be \$6.0 million each year of the 1989 biennium and state-assumed counties will pay one half of such expenditures. It is not possible to estimate the fiscal impact of the general relief medical assistance guidelines that will be promulgated by county commissioners in state-assumed counties.
- 3. The total revenue that would be generated under current law if each state-assumed county levied 12 mills would be \$7,241,000 in FY88 and \$7,426,000 in FY89.

FISCAL IMPACT:		FY88		FY89			
	Current Law	Proposed Law	Difference	Current Law	Proposed Law	Difference	
Revenues: General Fund	\$7,241,000	\$6,034,167	(\$1,206,833)	\$7,426,000	\$6,188,333	(\$1,237,667)	
Expenditures: General Fund - Benefits	\$6,000,000	\$3,000,000	\$3,000,000	\$6,000,000	\$6,000,000	\$3,000,000	
Net Reduction in General	Fund Expenditur	es	\$1,793,167			\$1,793,167	

EFFECT ON COUNTY OR OTHER LOCAL REVENUE OR EXPENDITURES:

It is difficult to predict the impact of proposed legislation on local revenue and expenditures. If county commissioners establish general relief medical guidelines that are more restrictive than the existing state program, local expenditures could be less than under current law. Presently counties with state-assumed welfare programs must levy 12 mills in property tax and remit the revenue to the state. If county general relief medical expenditures are greater than those incurred in FY86, counties may have to levy more than 12 mills to fund medical costs. If costs remain at the estimated level of \$6.0 million FY88 and in FY89, two counties would remain at the 12 mill levy; four would levy up to 14 mills; three would levy up to 19 mills; and these would levy to 23 mills.

DAVID L. HUNTER, BUDGET DIRECTOR

Office of Budget and Program Planning

CAL WINSLOW, PRIMARY SPONSOR

Fiscal Note for HB910, as introduced.

HB 910

DATE

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RE-REFERRED AND APPROVED BY COMMITTEE ON APPROPRIATIONS

2	INTRODUCED BY WINSLOW
3	
4	A BILL FOR AN ACT ENTITLED: "AN ACT REQUIRING COUNTIES WITH
5	STATE-ASSUMED WELFARE SERVICES TO MATCH EXPENDITURES FOR
6	GENERAL RELIEF MEDICAL ASSISTANCE; AUTHORIZING THESE
7	COUNTIES TO INCREASE THEIR MILL LEVY FOR WELFARE SERVICES;
8	ALLOWING COUNTY COMMISSIONERS TO ADOPT RULES FOR DETERMINING
9	ELIGIBILITY FOR GENERAL RELIEF MEDICAL ASSISTANCE; DELAYING
10	STATE ASSUMPTION OF WELFARE SERVICES FOR ADDITIONAL
11	COUNTIES; REQUIRING A COUNTY TO PAY THE COUNTY SHARE OF THE
12	COSTS OF GENERAL RELIEF MEDICAL ASSISTANCE PROVIDED TO ITS
13	RESIDENTS BY ANOTHER COUNTY; AMENDING SECTIONS 53-2-8127
14	53-2-811 THROUGH 53-2-813, AND 53-3-206, MCA; AND PROVIDING
15	AN EFFECTIVE DATE AND AN APPLICABILITY DATE."
16	
17	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
18	SECTION 1. SECTION 53-2-811, MCA, IS AMENDED TO READ:
19	"53-2-811. Transfer of county public assistance and
20	protective services to state department. (1) All authority
21	granted to the board of county commissioners to establish
22	and operate a public assistance program and provide

protective services for children and adults pursuant to

Titles 41 and 53 may be transferred to the department,

except that the county attorney shall continue to provide

HOUSE BILL NO. 910

legal	assistance	and	representa	tion	for	the pu	rpose	s of
adult a	nd child pro	otecti	ve service	s wit	hout c	harge	and	all
debts	and obliga	tions	incurred p	rior	to the	effec	tive	date
of stat	e assumption	n cont	inue as th	e re	sponsi	bility	of	the
county.								

- (2) The board of county commissioners, after public hearing, may by resolution or ordinance transfer to the department all powers and duties for public assistance and protective services for children and adults, including the selection, supervision, and termination of staff personnel associated with the performance of these activities. Upon the effective date of such transfer, the department shall assume all powers and duties related to public assistance and protective services and accorded by law to the county welfare department. If the notice required in subsection (3) is given, the transfer is effective at the start of the next state fiscal year.
- (3) Counties opting for state assumption shall notify the department at least 90 days prior to the start of the state fiscal year unless the time period is waived in whole or in part by the director of the department.
- (4) Counties opting for state assumption shall permit the department to use the same facilities currently occupied by the county department or substantially equal facilities, with fair rental value for such facilities to be paid by the

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department. Counties opting for state assumption shall transfer to the department all materials, equipment, and supplies used in the operation of the county department and which were paid for in whole or in part with federal or state funds.

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(5) No county may transfer county public assistance and protective services to the department during the biennium ending June 30, 1989. If a resolution or ordinance to transfer services under this part is adopted in April, May, or June 1987 or during the biennium ending June 30, 1989, the transfer is effective July 1, 1989, or within 90 days thereafter if the notice provided in subsection (3) requires it."

Section 2. Section 53-2-812, MCA, is amended to read:

"53-2-812. State assumption — permanent transfer to
department — exceptions. (1) A county opting for state
assumption does so on a complete and permanent basis, unless
the county requests to retain or reassume responsibility for
medical assistance or monetary payments to needy persons as
provided in Title 53, chapter 3, pursuant to the adoption of
a resolution or ordinance as provided in 53-2-811(2) and
notice to the department as provided in 53-2-811(3). Under
such a retention or reassumption, staff personnel continue
under the supervision and control of the department but the
department may contract with the counties for the operation

of programs provided in Title 53, chapter 3. A county may not retain or reassume assistance programs partially funded by the federal government.

(2) A county transferring all duties and responsibilities to the department may reassume limited responsibility for medical assistance or monetary payments to needy persons as provided in subsection (1) but may not thereafter request full state assumption. A county initially requesting limited state assumption may not thereafter request full state assumption. A county opting for limited or full state assumption does so on a permanent basis, except as provided in this section.

(3) The board of county commissioners of a county transferring all duties and responsibilities to the department shall adopt rules for determining eligibility for general relief medical assistance, as provided in 53-3-206." Section 3. Section 53-2-813, MCA, is amended to read: "53-2-813. Mill levy for counties transferring public assistance and protective services. (1) (a) Except as provided in subsection (1)(b), for the purpose of this part, at least 12 mills must be levied annually in those counties opting for state assumption.

(b) A county that levied an amount less than 12 mills for purposes of its county poor fund during fiscal year 1982 must levy an equivalent amount to the poor fund mill levy

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assessed by that county during fiscal year 1982 plus 1.5 mills, not--to-exceed-a-total-of-12-mills, less a mill levy equivalent to an amount the county can demonstrate was spent during fiscal year 1982 for the building or operation of a medical facility. The reduced mill levy exception provided in this subsection (1)(b) continues in effect until June 30, 1984. After that date, at least 12 mills must be levied in all counties where state assumption is in effect.

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- established in subsection (1) must be deposited in the state special revenue fund in the state treasury for the purpose of paying the expenses of the department. The mill-levy-may not--exceed--12-mills,--notwithstanding-actual-expenditures made-by-the-department.
- (3) For a county retaining or reassuming operational responsibility for <u>all</u> medical assistance or <u>all</u> monetary payments to needy persons as provided in 53-2-812, the levy provided in subsection (1) must be reduced by the mill levy equivalent expended by that county <u>or-the-department</u> for such purposes in the fiscal year immediately preceding the option to retain or reassume such responsibility."
- Section 4. Section 53-3-206, MCA, is amended to read:
 "53-3-206. Eligibility for general relief medical
 desistance. (1) In order to be considered for eligibility
 for general relief medical assistance, a person must be

found to have a serious medical condition.

- 2 (2) Eligibility for general relief medical assistance
 3 must be determined as provided in this section and 53-3-205.
 4 A person with a serious medical condition must apply for
 5 general relief medical assistance prior to the provision of
 6 medical services or within 90 days of the date the medical
 7 service is first provided. Eligibility is determined as of
 8 the date medical service is first provided.
- 9 (3) All persons who reside in the same residence and 10 are legally related to or responsible for each other are 11 considered to be one household for purposes of determining 12 general relief medical assistance.
- 13 (4) All individual or household resources must be used to offset medical obligations except those excluded in 53-3-205(7).
- 16 (5) To determine eligibility for county general relief
 17 medical assistance, a county welfare board may promulgate
 18 rules to establish the circumstances under which persons are
 19 unable to pay for their medical aid and hospitalization.
 20 However, no household with an income exceeding 300% of the
 21 amount set forth in 53-3-205(2) is eligible for such medical
 22 assistance.
- 23 (6) In a county with state-assumed weifare services: 24 the board of county commissioners shall adopt rules to determine eligibility for general relief medical assistance.

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(7) In a county with state-assumed welfare services:
(a) covered medical services must be provided at no
cost to the person residing in a household if the average
household monthly income that is reasonably certain to be
received in a 12-month period beginning with the month the
medical service was provided does not exceed the amount in
53-3-205(2);

(b) a person is not eligible for medical services if the household in which he resides has an average monthly income reasonably certain to be received in a 12-month period beginning with the month the medical service was provided in excess of that set forth in the following table:

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13		Mont	hly
14	Family	Size	Level
15	1	\$ 2	187
16	2	4	133
17	3	5	26
18	4	6	18
19	5	7	14
20	6	. 8	104
21	7		196
27	8	9	88
23	9	1,0	81
24	10	1,1	7 3
25	11	1,1	94

1	12	1,215
2	13	1,236
3	14	1,256
4	15	1,277
5	16 or more	1,298

(c) if the average household monthly income reasonably certain to be received in a 12-month period beginning with the month the medical service was provided is between the amount in 53-3-205(2) and the monthly income level set forth in subsection (b), a household must first incur covered medical costs equal to the difference between its average monthly income and the monthly income standard in 53-3-205(2) before medical assistance is provided.

- 18 (8) A county with state-assumed welfare services must
 15 reimburse the department for one-half of the costs of
 16 general relief medical assistance in that county. This
 17 reimbursement must be deposited in the state special revenue
 18 fund in the state treasury for the purpose of paying the
 19 expenses of the department.
- 20 (9) A county with state-assumed welfare services is 21 not eligible for an emergency grant under 53-2-323.
- 22 (10) IF GENERAL RELIEF MEDICAL ASSISTANCE IS PROVIDED
 23 BY A COUNTY WITH STATE-ASSUMED WELFARE SERVICES TO A PERSON
 24 WHO HAS LIVED IN THAT COUNTY LESS THAN 1 YEAR, THE COUNTY IN
 25 WHICH HE MOST RECENTLY LIVED FOR AT LEAST 2 MONTHS, AND NOT

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1	THE COUNTY THAT PROVIDED THE ASSISTANCE, SHALL REIMBURSE THE
2	DEPARTMENT FOR ONE-HALF THE COSTS OF GENERAL RELIEF MEDICAL
3	ASSISTANCE."
4	NEW SECTION. Section 5. Extension of authority. Any
5	existing authority of the department of social and
6	rehabilitation services to make rules on the subject of $% \left(1\right) =\left(1\right) \left(1\right) +\left(1\right) \left(1\right) \left(1\right) +\left(1\right) \left(1\right) \left($
7	provisions of this act is extended to the provisions of this
8	act.
9	NEW SECTION. Section 6. Effective date
10	applicability. This act is effective July 1, 1987, and
11	applies to taxable years beginning after December 31, 1987.
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1	HOUSE BILL NO. 910						910
2				INTRODUCE	D BY	WIN	SLOW
3							
4	A BILL	FOR AN	ACT	ENTITLED:	"AN	ACT	REQUI

A BILL FOR AN ACT ENTITLED: "AN ACT REQUIRING COUNTIES WITH STATE-ASSUMED WELFARE SERVICES TO MATCH-EXPENDITURES PROVIDE

A 10 PERCENT REIMBURSEMENT FOR GENERAL RELIEF MEDICAL ASSISTANCE; AUTHORIZING THESE COUNTIES TO INCREASE THEIR MILL LEVY FOR WELFARE SERVICES; ALLOWING COUNTY COMMISSIONERS TO ADOPT RULES FOR DETERMINING ELIGIBILITY FOR GENERAL RELIEF MEDICAL ASSISTANCE; DELAYING STATE ASSUMPTION OF WELFARE SERVICES FOR ADDITIONAL COUNTIES; REQUIRING A COUNTY TO PAY THE COUNTY SHARE OF THE COSTS OF GENERAL RELIEF MEDICAL ASSISTANCE PROVIDED TO ITS RESIDENTS BY ANOTHER COUNTY; AMENDING SECTIONS 53-2-812, 53-2-811 THROUGH 53-2-813, AND 53-3-206, MCA; AND PROVIDING AN EFFECTIVE DATE AND AN APPLICABILITY DATE."

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BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

SECTION 1. SECTION 53-2-811, MCA, IS AMENDED TO READ:

"53-2-811. Transfer of county public assistance and protective services to state department. (1) All authority granted to the board of county commissioners to establish and operate a public assistance program and provide protective services for children and adults pursuant to Titles 41 and 53 may be transferred to the department,



except that the county attorney shall continue to provide
legal assistance and representation for the purposes of
adult and child protective services without charge and all
debts and obligations incurred prior to the effective date
of state assumption continue as the responsibility of the
county.

(2) The board of county commissioners, after public hearing, may by resolution or ordinance transfer to the department all powers and duties for public assistance and protective services for children and adults, including the 10 selection, supervision, and termination of staff personnel 11 associated with the performance of these activities. Upon 12 the effective date of such transfer, the department shall 13 assume all powers and duties related to public assistance 14 and protective services and accorded by law to the county 15 16 welfare department. If the notice required in subsection (3) is given, the transfer is effective at the start of the 17 next state fiscal year. 18

- 19 (3) Counties opting for state assumption shall notify 20 the department at least 90 days prior to the start of the 21 state fiscal year unless the time period is waived in whole 22 or in part by the director of the department.
- (4) Counties opting for state assumption shall permit
 the department to use the same facilities currently occupied
 by the county department or substantially equal facilities,

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with fair rental value for such facilities to be paid by the
department. Counties opting for state assumption shall
transfer to the department all materials, equipment, and
supplies used in the operation of the county department and
which were paid for in whole or in part with federal or
state funds.

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(5) No county may transfer county public assistance and protective services to the department during the biennium ending June 30, 1989. If a resolution or ordinance to transfer services under this part is adopted in April, May, or June 1987 or during the biennium ending June 30, 1989, the transfer is effective July 1, 1989, or within 90 days thereafter if the notice provided in subsection (3) requires it."

Section 2. Section 53-2-812, MCA, is amended to read:

"53-2-812. State assumption -- permanent transfer to
department -- exceptions. (1) A county opting for state
assumption does so on a complete and permanent basis, unless
the county requests to retain or reassume responsibility for
medical assistance or monetary payments to needy persons as
provided in Title 53, chapter 3, pursuant to the adoption of
a resolution or ordinance as provided in 53-2-811(2) and
notice to the department as provided in 53-2-811(3). Under
such a retention or reassumption, staff personnel continue
under the supervision and control of the department but the

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department may contract with the counties for the operation of programs provided in Title 53, chapter 3. A county may not retain or reassume assistance programs partially funded

by the federal government.

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5 (2) A county transferring all duties and responsibilities to the department may reassume limited responsibility for medical assistance or monetary payments to needy persons as provided in subsection (1) but may not thereafter request full state assumption. A county initially 10 requesting limited state assumption may not thereafter 11 request full state assumption. A county opting for limited 12 or full state assumption does so on a permanent basis, 13 except as provided in this section.

transferring all duties and responsibilities to the department shall adopt rules for determining eligibility for general relief medical assistance, as provided in 53-3-206."

Section 3. Section 53-2-813, MCA, is amended to read:

"53-2-813. Mill levy for counties transferring public assistance and protective services. (1) (a) Except as provided in subsection (1)(b), for the purpose of this part, at least 12 mills must be levied annually in those counties

(3) The board of county commissioners of a county

(b) A county that levied an amount less than 12 millsfor purposes of its county poor fund during fiscal year 1982

opting for state assumption.

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must levy an equivalent amount to the poor fund mill levy assessed by that county during fiscal year 1982 plus 1.5 mills, not-to-exceed-a-total-of-12-mills, less a mill levy equivalent to an amount the county can demonstrate was spent during fiscal year 1982 for the building or operation of a medical facility. The reduced mill levy exception provided in this subsection (1)(b) continues in effect until June 30, 1984. After that date, at least 12 mills must be levied in all counties where state assumption is in effect.

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- (2) The proceeds of 10 mills of the mill levy established in subsection (1) must be deposited in the state special revenue fund in the state treasury for the purpose of paying the expenses of the department. The-mill-levy-may not-exceed-12--mills;--notwithstanding--actual--expenditures made-by-the-department:
- (3) For a county retaining or reassuming operational responsibility for all medical assistance or all monetary payments to needy persons as provided in 53-2-812, the levy provided in subsection (1) must be reduced by the mill levy equivalent expended by that county or-the-department for such purposes in the fiscal year immediately preceding the option to retain or reassume such responsibility."
- 23 Section 4. Section 53-3-206, MCA, is amended to read: "53-3-206. Eligibility for general relief medical 24 25 assistance. (1) In order to be considered for eligibility

- for general relief medical assistance, a person must be found to have a serious medical condition.
 - (2) Eligibility for general relief medical assistance must be determined as provided in this section and 53-3-205. A person with a serious medical condition must apply for general relief medical assistance prior to the provision of medical services or within 90 days of the date the medical service is first provided. Eliqibility is determined as of the date medical service is first provided.
- 10 (3) All persons who reside in the same residence and 11 are legally related to or responsible for each other are 12 considered to be one household for purposes of determining 13 general relief medical assistance.
- 14 (4) All individual or household resources must be used 15 to offset medical obligations except those excluded in 16 53-3-205(7).
- 17 (5) To determine eligibility for county general relief medical assistance, a county welfare board may promulgate 19 rules to establish the circumstances under which persons are 20 unable to pay for their medical aid and hospitalization. 21 However, no household with an income exceeding 300% of the 22 amount set forth in 53-3-205(2) is eligible for such medical 23 assistance.
 - (6) In a county with state-assumed welfare services:, the board of county commissioners shall adopt rules to

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1	determine eligibility for general relief medical assistance.
2	(7) In a county with state-assumed welfare services:
3	(a) covered medical services must be provided at no
4	cost to the person residing in a household if the average
5	household monthly income that is reasonably certain to be
6	received in a 12-month period beginning with the month the
7	medical service was provided does not exceed the amount in
8	53-3-205(2);
9	(b) a person is not eligible for medical services if
10	the household in which he resides has an average monthly
11	income reasonably certain to be received in a 12-month
12	period beginning with the month the medical service was
13	provided in excess of that set forth in the following table:
14	Monthly
15	Family Size Income Level
16	1 S 287

13	provided in e	xcess of	that	set	forth	in	the	following	table
14							ř	lonthly	
15	Famil	y Size					Inco	me Level	
16		1					\$	2 8 7	
17		2						433	
18		3						526	
19		4						618	
20		5						714	
21		6						804	
22		7						896	
23		8						988	
24		9						1,081	
25	1	.0						1,173	

1	11	1,194
2	12	1,215
3	13	1,236
4	14	1,256
5	15	1,277
6	16 or more	1.298

- (c) if the average household monthly income reasonably certain to be received in a 12-month period beginning with the month the medical service was provided is between the amount in 53-3-205(2) and the monthly income level set forth in subsection (b), a household must first incur covered medical costs equal to the difference between its average monthly income and the monthly income standard in 53-3-205(2) before medical assistance is provided.
- (8) A county with state-assumed welfare services must reimburse the department for one-half 10% of the costs of general relief medical assistance in that county. This reimbursement must be deposited in the state special revenue fund in the state treasury for the purpose of paying the expenses of the department.
- (9) A county with state-assumed welfare services is not eligible for an emergency grant under 53-2-323.
- 23 (10) IF GENERAL RELIEF MEDICAL ASSISTANCE IS PROVIDED

 24 BY A COUNTY WITH STATE-ASSUMED WELFARE SERVICES TO A PERSON

 25 WHO HAS LIVED IN THAT COUNTY LESS THAN 1 YEAR, THE COUNTY IN

нв 0910/03

l.	WHICH HE MOST RECENTLY LIVED FOR AT LEAST 2 MONTHS, AND NOT
2 .	THE COUNTY THAT PROVIDED THE ASSISTANCE, SHALL REIMBURSE THE
3	DEPARTMENT FOR one-half 10% the costs of general relief
7	medical assistance."
5	NEW SECTION. Section 5. Extension of authority. Any
5	existing authority of the department of social and
7	rehabilitation services to make rules on the subject of the
3	provisions of this act is extended to the provisions of this
9	act.
)	NEW SECTION. Section 6. Effective date
l	applicability. This act is effective July 1, 1987, and
2	applies to taxable years beginning after December 31, 1987.

-End-