

1 AN ACT relating to Medicaid copayments for nonemergent emergency room visits.

2 ***Be it enacted by the General Assembly of the Commonwealth of Kentucky:***

3 ➔Section 1. KRS 205.6312 is amended to read as follows:

4 **(1) Except as provided in subsection (2) of this section**~~[Notwithstanding any state law~~
5 ~~to the contrary]~~, the cabinet or a managed care organization contracted by the
6 cabinet to provide Medicaid services pursuant to this chapter shall not institute
7 copayments, cost sharing, or similar charges to be paid by any medical assistance
8 recipients, their spouses, or parents, for any assistance provided pursuant to this
9 chapter, federal law, or any federal Medicaid waiver.

10 **(2) (a) Subsection (1) of this section notwithstanding, the cabinet shall exercise the**
11 **state's option under 42 C.F.R. sec. 447.54 to impose cost sharing for**
12 **nonemergency services provided in a hospital emergency department. Cost**
13 **sharing requirements imposed under this section shall:**

14 **1. To the fullest extent permitted under federal law, apply to all Medicaid**
15 **beneficiaries;**

16 **2. Exempt only those beneficiaries as the state may be required to exempt**
17 **in order to comply with federal law; and**

18 **3. Include cost sharing amounts for individuals with family income;**

19 **a. Equal to or less than one hundred fifty percent (150%) of the**
20 **federal poverty level that are equal to the maximum allowable**
21 **cost sharing under 42 C.F.R. sec. 447.54(b); and**

22 **b. Greater than one hundred fifty percent (150%) of the federal**
23 **poverty level at least equal to those imposed under subdivision a.**
24 **of this subparagraph.**

25 **(b) Unless otherwise required by federal law, cost sharing requirements**
26 **imposed under this section shall not be waived, excused, or otherwise**
27 **reduced or dismissed by the cabinet, the Department for Medicaid Services,**

1 *any managed care organization with whom the department contracts for the*
2 *delivery of Medicaid services, or any other third-party administrator*
3 *contracted by the cabinet or department to administer any part of the*
4 *Medicaid program.*

5 ➔Section 2. If the Department for Medicaid Services or the Cabinet for Health
6 and Family Services determines that a state plan amendment, waiver, or any other form
7 of authorization or approval from any federal agency is necessary prior to implementation
8 of Section 1 of this Act for any reason, including the loss of federal funds, the department
9 or cabinet shall, within 90 days after the effective date of this Act, request any necessary
10 state plan amendment, waiver, authorization, or approval, and may only delay full
11 implementation of those provisions for which a state plan amendment, waiver,
12 authorization, or approval was deemed necessary until the state plan amendment, waiver,
13 authorization, or approval is granted or approved.

14 ➔Section 3. The Department for Medicaid Services or the Cabinet for Health and
15 Family Services shall, in accordance with KRS 205.525, provide a copy of any state plan
16 amendment, waiver application, or other request for authorization or approval submitted
17 pursuant to Section 2 of this Act to the Legislative Research Commission for referral to
18 the Interim Joint Committee on Health Services and the Interim Joint Committee on
19 Appropriations and Revenue and shall provide an update on the status of any application
20 or request submitted pursuant to Section 2 of this Act at the request of the Legislative
21 Research Commission or any committee thereof.