ENROLLED ACT NO. 11, HOUSE OF REPRESENTATIVES

SIXTY-FIFTH LEGISLATURE OF THE STATE OF WYOMING 2020 BUDGET SESSION

AN ACT relating to the child health insurance program; authorizing the program to be provided by the state or by a private insurance company; amending charge and collection limits; discontinuing the CHIP health benefits plan committee; making conforming amendments; and providing for an effective date.

Be It Enacted by the Legislature of the State of Wyoming:

Section 1. W.S. 35-25-103, 35-25-104(a)(intro), 35-25-106(a) and (b) and 35-25-108(b)(i) are amended to read:

35-25-103. Child health insurance program eligibility; services by department or private health insurance.

(a) Subject to approval of the state plan by the United States secretary of health and human services, and subject to available state and federal funding department shall provide a health insurance plan offered through a private insurance company licensed by the insurance commissioner to write insurance in Wyoming for an eligible child whose monthly gross family income is not more than one hundred eighty-five percent (185%) of the federal poverty level, until July 1, 2005, and thereafter, whose monthly gross family income is not more than two hundred percent (200%) of the federal poverty level. child who is determined eliqible to receive benefits under this section shall remain eligible for twelve (12) months as long as the child resides in the state of Wyoming and has not yet attained nineteen (19) years of age. A child's eligibility to receive benefits under this act shall be redetermined on an annual basis. A simplified application process, which includes minimum eligibility requirements,

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shall be provided throughout the state at various public and private establishments approved by the department of health. To be determined eligible to receive benefits under this section, a child shall not be eligible under the Wyoming Medical Assistance and Services Act, shall not have been covered under another health insurance plan for a minimum of one (1) month prior to application for coverage under this act or, upon birth, the child would not otherwise be covered by a public or private health insurance plan. Eligibility under this section shall be determined by the department of health or its designee.

- (b) The child health insurance plan required by subsection (a) of this section shall be provided either through a private health insurance company licensed by the insurance commissioner to write insurance in Wyoming or by the department of health's division responsible for administering the Medicaid program. The department's division shall be used to provide the insurance plan only if it can provide the plan at a lower cost than can a qualified private insurance company or if use of the division will otherwise accrue more benefits to the state than will use of a private insurance company. If the child health insurance plan required by subsection (a) of this section is provided through the department's division, the department shall competitively procure the contract at least once every five (5) years. In awarding the contract the department shall compare the cost of operating the program through a private insurance company to a forecasted state administered alternative.
- (c) A medical provider who accepts payment for services provided under this section shall not charge or attempt to collect payments in excess of a rate schedule established by the department or in excess of rates

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negotiated with a private health insurance company who is offering child health insurance pursuant to this act.

35-25-104. Program benefits.

(a) A child eligible for services under this act shall receive benefits developed by the health benefits committee established under W.S. 35-25-105 department as allowed by 42 U.S.C. 1397cc et seq. and that include:

35-25-106. Private health insurance plan request for proposals.

(a) If the child health insurance plan required by W.S. 35-25-103 is provided through a private health insurance company, the department shall publish notice of issue a request for proposals from qualified insurers to provide a health insurance plan for children insured under W.S. 35-25-103 of this act not less than once every five (5) years, in addition to the requirements set forth in W.S. 35-25-103(b). The department shall award the contract for this service to an insurer based on price, benchmark required services provision of determined pursuant to W.S. 35-25-105(c), and other factors listed in the department's request for proposals. The A contract for health insurance awarded under this section shall contain provisions with respect to exclusions from coverage for preexisting conditions that are no more restrictive than those described in 42 U.S.C. 1397bb(b)(1)(B)(ii). contract shall include provisions for changes in terms and conditions and for rebidding in case major changes are needed. The department shall have the right to rebid the contract after two (2) years.

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(b) Biennially, the department may allow the a contractor providing child health insurance pursuant to subsection (a) of this section to adjust the price charged for the coverage, but if the price is increased, the department may, after public notice, rebid the contract or the department may administer the program pursuant to W.S. 35-25-103.

35-25-108. Implementation; duties; restrictions on the department of health.

- (b) The department shall not implement:
- (i) The program under this act until a state plan has been approved by the United States secretary of health and human services or, for any modified plan, until the modified plan has been approved if the modifications require the approval of the United States secretary of health and human services; and
- **Section 2.** W.S. 35-25-105 and 35-25-106(c) are repealed.
 - Section 3. This act is effective July 1, 2020.

(END)