STATE OF NEW YORK

8157

IN SENATE

January 10, 2024

Introduced by Sen. HOYLMAN-SIGAL -- read twice and ordered printed, and when printed to be committed to the Committee on Health

AN ACT to amend the social services law, in relation to automatic continuous enrollment in medical assistance for children through age five

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

Section 1. This act shall be known and may be cited as the "keep kids covered act".

§ 2. Section 366-h of the social services law, as amended by chapter 121 of the laws of 2017, is amended to read as follows:

§ 366-h. Automated system; established. Notwithstanding any inconsistent provision of law or regulation, the commissioner of health shall, as soon as practicable, establish an automated system to ensure that persons who meet the criteria for receipt of medical assistance benefits under paragraph (a) or (c)*, or a child under paragraph (b),* of subdivision four of section three hundred sixty-six of this title shall remain enrolled in the medical assistance program without interruption and receive the benefits set forth according to paragraph (a)*, (b)* or (c) of subdivision four of section three hundred sixty-six of this title. Pending implementation of such automated system, such commissioner shall, in consultation with the office of temporary and disability assistance, undertake and continue efforts to educate local departments of social services about the measures they must take to ensure that medical assistance benefits are provided to persons eligible for such benefits under subdivision four of section three hundred sixty-six of this title.

§ 3. Paragraph (b) of subdivision 4 of section 366 of the social services law, as added by section 2 of part D of chapter 56 of the laws of 2013, subparagraph 1 as amended by section 3 of part CCC of chapter 56 of the laws of 2022, is amended to read as follows:

(b) Pregnant women and children.

(1) A pregnant woman eligible for medical assistance under subparagraph two or four of paragraph (b) of subdivision one of this section on any day of her pregnancy will continue to be eligible for such care and

EXPLANATION--Matter in *italics* (underscored) is new; matter in brackets [-] is old law to be omitted.

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services for a period of one year beginning on the last day of pregnancy, without regard to any change in the income of the family that includes the pregnant woman, even if such change otherwise would have rendered her ineligible for medical assistance.

(1-a) Notwithstanding any other provision of law, any child under the age of six who is at any time determined to be eligible for medical assistance, or who is a member of a family which was eligible for medical assistance but became ineligible, shall remain continuously eligible for medical assistance until the age of six and shall remain continuously enrolled under section three hundred sixty-six-h of this title. The department shall notify the parent or guardian of any child under the age of six who is determined to be eligible for medical assistance of the rights of such child to extended benefits under this subparagraph.

(2) A child born to a woman eligible for and receiving medical assistance on the date of the child's birth shall be deemed to have applied for medical assistance and to have been found eligible for such assistance on the date of such birth and to remain eligible for such assistance for a period of [~~one year~~] **five years**, so long as the child is a member of the woman's household [~~and the woman remains eligible for such assistance or would remain eligible for such assistance if she were pregnant~~].

(3) A child **over the age of six and** under the age of nineteen who is determined eligible for medical assistance under the provisions of this section, shall, consistent with applicable federal requirements, remain eligible for such assistance until the earlier of:

(i) the last day of the month which is twelve months following the determination or redetermination of eligibility for such assistance; or

(ii) the last day of the month in which the child reaches the age of nineteen.

(4) An infant eligible under subparagraph two or four of paragraph (b) of subdivision one of this section who is receiving medically necessary in-patient services for which medical assistance is provided on the date the child attains one year of age, and who, but for attaining such age, would remain eligible for medical assistance under such subparagraph, shall continue to remain eligible until the end of the stay for which in-patient services are being furnished **or until age six, whichever is later**.

(5) A child eligible under subparagraph three of paragraph (b) of subdivision one of this section who is receiving medically necessary in-patient services for which medical assistance is provided on the date the child attains nineteen years of age, and who, but for attaining such age, would remain eligible for medical assistance under this paragraph, shall continue to remain eligible until the end of the stay for which in-patient services are being furnished.

(6) A woman who was pregnant while in receipt of medical assistance who subsequently loses her eligibility for medical assistance shall have her eligibility for medical assistance continued for a period of twenty-four months from the end of the month in which the sixtieth day following the end of her pregnancy occurs, but only for Federal Title X services which are eligible for reimbursement by the federal government at a rate of ninety percent; provided, however, that such ninety percent limitation shall not apply to those services identified by the commissioner as services, including treatment for sexually transmitted diseases, generally performed as part of or as a follow-up to a service eligible for such ninety percent reimbursement; and provided further,

however, that nothing in this paragraph shall be deemed to affect payment for such Title X services if federal financial participation is not available for such care, services and supplies.

§ 4. The commissioner of health shall, to the extent necessary, submit the appropriate waivers, including, but not limited to, those authorized pursuant to section eleven hundred fifteen of the federal social security act, or successor provisions, and any other waivers necessary to achieve the purposes of this act necessary to secure federal funding.

§ 5. This act shall take effect on the sixtieth day after it shall have become a law.