

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 783 Session of 2023

INTRODUCED BY KEEFER, PICKETT, SCHLEGEL CULVER, HAMM, KAUFFMAN,
FLICK, ZIMMERMAN AND LEADBETER, MARCH 30, 2023

REFERRED TO COMMITTEE ON HUMAN SERVICES, MARCH 30, 2023

AN ACT

1 Amending the act of June 13, 1967 (P.L.31, No.21), entitled "An
2 act to consolidate, editorially revise, and codify the public
3 welfare laws of the Commonwealth," in public assistance,
4 further providing for persons eligible for medical
5 assistance.

6 The General Assembly of the Commonwealth of Pennsylvania
7 hereby enacts as follows:

8 Section 1. Section 441.1 of the act of June 13, 1967
9 (P.L.31, No.21), known as the Human Services Code, is amended by
10 adding a subsection to read:

11 Section 441.1. Persons Eligible for Medical Assistance.--* *
12 *

13 (e) The department shall establish an enrollment process for
14 individuals eligible for medical assistance under this section
15 to enroll in an individual plan approved by the department and
16 offered as part of the Commonwealth's approved Title XIX State
17 Plan as follows:

18 (1) The enrollment process shall include information for the
19 individual that, except as otherwise provided for under

paragraph (4), the individual shall remain enrolled with the same plan for one year.

(2) After an individual eligible for medical assistance under this section enrolls in a plan approved by the department under the Commonwealth's approved Title XIX State Plan, the individual shall remain enrolled in the individual plan until the individual's redetermination period, but for at least 12 months unless the individual qualifies for an exemption under paragraph (4), or until such time as the individual is no longer eligible for medical assistance.

(3) The department shall notify the individual eligible for medical assistance under this section about the ability at the time of redetermination to change the plan in which the individual is enrolled for services offered under the Commonwealth's approved Title XIX State Plan.

(4) The department may grant an exemption to the limitation on changing plans under this section only if the exemption matches standard practices for health insurance plans approved by the Insurance Department under the insurance laws of this Commonwealth, including, but not limited to:

(i) a qualifying life event;

(ii) a relocation of the individual to a region which is not served by the selected Medicaid managed care organization; or

(iii) a verified health condition which requires treatment by a provider not currently participating in the Medicaid managed care organization.

(5) The department shall approve the exemption for an individual based on applicable Federal regulations regarding enrollment or on the approved State plan.

(6) Nothing in this section shall be construed to remove an

1 individual's eligibility for medical assistance for missing the
2 enrollment period provided in this subsection.

3 Section 2. This act shall take effect immediately.