## **SENATE BILL No. 838**

October 25, 2005, Introduced by Senator EMERSON and referred to the Committee on Appropriations.

A bill to amend 1939 PA 280, entitled "The social welfare act,"

SENATE BILL No. 838

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by amending sections 106 and 107 (MCL 400.106 and 400.107), section 106 as amended by 2004 PA 409.

## THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 106. (1) A medically indigent individual is defined as:
- (a) An individual receiving family independence programbenefits or an individual receiving supplemental security income
  - under title XVI or state supplementation under title XVI subject to
    - limitations imposed by the director according to title XIX.
    - (b) Except as provided in section 106a, an individual who meets all of the following conditions:
      - (i) The individual has applied in the manner the family

- 1 independence agency prescribes.
- 2 (ii) The individual's need for the type of medical assistance
- 3 available under this act for which the individual applied has been
- 4 professionally established and payment for it is not available
- 5 through the legal obligation of a public or private contractor to
- 6 pay or provide for the care without regard to the income or
- 7 resources of the patient. The state department is subrogated to any
- 8 right of recovery that a patient may have for the cost of
- 9 hospitalization, pharmaceutical services, physician services,
- 10 nursing services, and other medical services not to exceed the
- 11 amount of funds expended by the state department for the care and
- 12 treatment of the patient. The patient or other person acting in the
- 13 patient's behalf shall execute and deliver an assignment of claim
- 14 or other authorizations as necessary to secure the right of
- 15 recovery to the department. A payment may be withheld under this
- 16 act for medical assistance for an injury or disability for which
- 17 the individual is entitled to medical care or reimbursement for the
- 18 cost of medical care under sections 3101 to 3179 of the insurance
- 19 code of 1956, 1956 PA 218, MCL 500.3101 to 500.3179, or under
- 20 another policy of insurance providing medical or hospital benefits,
- 21 or both, for the individual unless the individual's entitlement to
- 22 that medical care or reimbursement is at issue. If a payment is
- 23 made, the state department, to enforce its subrogation right, may
- 24 do either of the following: (a) intervene or join in an action or
- 25 proceeding brought by the injured, diseased, or disabled
- 26 individual, the individual's guardian, personal representative,
- 27 estate, dependents, or survivors, against the third person who may

- 1 be liable for the injury, disease, or disability, or against
- 2 contractors, public or private, who may be liable to pay or provide
- 3 medical care and services rendered to an injured, diseased, or
- 4 disabled individual; (b) institute and prosecute a legal proceeding
- 5 against a third person who may be liable for the injury, disease,
- 6 or disability, or against contractors, public or private, who may
- 7 be liable to pay or provide medical care and services rendered to
- 8 an injured, diseased, or disabled individual, in state or federal
- 9 court, either alone or in conjunction with the injured, diseased,
- 10 or disabled individual, the individual's guardian, personal
- 11 representative, estate, dependents, or survivors. The state
- 12 department may institute the proceedings in its own name or in the
- 13 name of the injured, diseased, or disabled individual, the
- 14 individual's guardian, personal representative, estate, dependents,
- 15 or survivors. As provided in section 6023 of the revised judicature
- 16 act of 1961, 1961 PA 236, MCL 600.6023, the state department, in
- 17 enforcing its subrogation right, shall not satisfy a judgment
- 18 against the third person's property that is exempt from levy and
- 19 sale. The injured, diseased, or disabled individual may proceed in
- 20 his or her own name, collecting the costs without the necessity of
- 21 joining the state department or the state as a named party. The
- 22 injured, diseased, or disabled individual shall notify the state
- 23 department of the action or proceeding entered into upon
- 24 commencement of the action or proceeding. An action taken by the
- 25 state or the state department in connection with the right of
- 26 recovery afforded by this section does not deny the injured,
- 27 diseased, or disabled individual any part of the recovery beyond

- 1 the costs expended on the individual's behalf by the state
- 2 department. The costs of legal action initiated by the state shall
- 3 be paid by the state. A payment shall not be made under this act
- 4 for medical assistance for an injury, disease, or disability for
- 5 which the individual is entitled to medical care or the cost of
- 6 medical care under the worker's disability compensation act of
- 7 1969, 1969 PA 317, MCL 418.101 to 418.941; except that payment may
- 8 be made if an appropriate application for medical care or the cost
- 9 of the medical care has been made under the worker's disability
- 10 compensation act of 1969, 1969 PA 317, MCL 418.101 to 418.941,
- 11 entitlement has not been finally determined, and an arrangement
- 12 satisfactory to the state department has been made for
- 13 reimbursement if the claim under the worker's disability
- 14 compensation act of 1969, 1969 PA 317, MCL 418.101 to 418.941, is
- 15 finally sustained.
- 16 (iii) The individual has an annual income that is below, or
- 17 SUBJECT TO LIMITATIONS IMPOSED BY THE DIRECTOR AND because of
- 18 medical expenses falls below, the protected basic maintenance
- 19 level. The protected basic maintenance level for 1-person and 2-
- 20 person families shall be at least 100% of the higher of the
- 21 payment standards generally used to determine eligibility in the
- 22 family independence program. and the supplemental security income
- 23 program under title XVI, including state supplementation. For
- 24 families of 3 or more persons, the protected basic maintenance
- 25 level shall be at least 100% of the payment standard generally used
- 26 to determine eligibility in the family independence program. These
- 27 levels shall recognize regional variations and shall not exceed

- 1 133-1/3% of the payment standard generally used to determine
- 2 eligibility in the family independence program.
- 3 (iv) The individual, if a family independence program related
- 4 individual and living alone, has liquid or marketable assets of not
- 5 more than \$2,000.00 in value, or, if a 2-person family, the family
- 6 has liquid or marketable assets of not more than \$3,000.00 in
- 7 value. The <u>family independence agency</u> **STATE DEPARTMENT** shall
- 8 establish comparable liquid or marketable asset amounts for larger
- 9 family groups. Excluded in making the determination of the value of
- 10 liquid or marketable assets are the values of: the homestead;
- 11 clothing; household effects; \$1,000.00 of cash surrender value of
- 12 life insurance, except that if the health of the insured makes
- 13 continuance of the insurance desirable, the entire cash surrender
- 14 value of life insurance is excluded from consideration, up to the
- 15 maximum provided or allowed by federal regulations and in
- 16 accordance with the STATE DEPARTMENT rules; of the family
- 17 independence agency; the fair market value of tangible personal
- 18 property used in earning income; an amount paid as judgment or
- 19 settlement for damages suffered as a result of exposure to agent
- 20 orange, as defined in section 5701 of the public health code, 1978
- 21 PA 368, MCL 333.5701; and a space or plot purchased for the
- 22 purposes of burial for the person. For individuals related to the
- 23 title XVI program, the appropriate resource levels and property
- 24 exemptions specified in title XVI shall be used.
- (v) The individual is not an inmate of a public institution
- 26 except as a patient in a medical institution.
- (vi) The individual meets the eligibility standards for

- 1 supplemental security income under title XVI or for state
- 2 supplementation under the act, subject to limitations imposed by
- 3 the director according to title XIX; or meets the eligibility
- 4 standards for family independence program benefits; -, except for
- 5 income or income and resources; or is a child from 18 to 21 years
- 6 of age and his or her adult caretaker would be eligible for family
- 7 independence program benefits except for age, income, or income and
- 8 resources; or is a child under 21 years of age and is from a family
- 9 whose income is below the basic maintenance level OR MEETS THE
- 10 ELIGIBILITY STANDARDS FOR OPTIONAL ELIGIBILITY GROUPS UNDER TITLE
- 11 XIX, SUBJECT TO LIMITATIONS IMPOSED BY THE DIRECTOR ACCORDING TO
- 12 TITLE XIX.
- 13 (2) As used in this act:
- 14 (a) "Medicaid contracted health plan" means a managed care
- 15 organization with whom the state department contracts to provide or
- 16 arrange for the delivery of comprehensive health care services as
- 17 authorized under this act.
- 18 (b) "Medical institution" means a state licensed or approved
- 19 hospital, nursing home, medical care facility, psychiatric
- 20 hospital, or other facility or identifiable unit of a listed
- 21 institution certified as meeting established standards for a
- 22 nursing home or hospital in accordance with the laws of this state.
- 23 (c) "Title XVI" means title XVI of the social security act, 42
- 24 USC 1381 to 1382j and 1383 to 1383f.
- 25 (3) An individual receiving medical assistance under this act
- 26 or his or her legal counsel shall notify the state department when
- 27 filing an action in which the state department may have a right to

- 1 recover expenses paid under this act. If the individual is enrolled
- 2 in a medicaid contracted health plan, the individual or his or her
- 3 legal counsel shall provide notice to the MEDICAID contracted
- 4 health plan in addition to providing notice to the state
- 5 department.
- 6 (4) If a legal action in which the state department, a
- 7 medicaid contracted health plan, or both has a right to recover
- 8 expenses paid under this act is filed and settled after -the date
- 9 of the amendatory act that added this subsection NOVEMBER 29, 2004
- 10 without notice to the state department or the medicaid contracted
- 11 health plan, the state department or the medicaid contracted health
- 12 plan may file a legal action against the individual or his or her
- 13 legal counsel, or both, to recover expenses paid under this act.
- 14 The attorney general shall recover any cost or attorney fees
- 15 associated with a recovery under this subsection.
- 16 (5) The state department has first priority against the
- 17 proceeds of the net recovery from the settlement or judgment in an
- 18 action settled in which notice has been provided under subsection
- 19 (3). A medicaid contracted health plan has priority immediately
- 20 after the state department in an action settled in which notice has
- 21 been provided under subsection (3). The state department and a
- 22 medicaid contracted health plan shall recover the full cost of
- 23 expenses paid under this act unless the state department or the
- 24 medicaid contracted health plan agrees to accept an amount less
- 25 than the full amount. If the individual would recover less against
- 26 the proceeds of the net recovery than the expenses paid under this
- 27 act, the state department or medicaid contracted health plan, and

- 1 the individual shall share equally in the proceeds of the net
- 2 recovery. As used in this subsection, "net recovery" means the
- 3 total settlement or judgment less the costs and fees incurred by or
- 4 on behalf of the individual who obtains the settlement or judgment.
- 5 Sec. 107. In establishing financial eligibility for the
- 6 medically indigent as defined in section -106 (2) 106, income
- 7 shall be disregarded in accordance with standards established for
- 8 the related categorical assistance program. Additional income
- 9 shall be applied against: (i) the cost of medical care not
- 10 authorized under this act, and (ii) the cost of services authorized
- 11 under this act, in excess of the basic amount. For medical
- 12 assistance only, income shall include the amount of contribution
- 13 which THAT an estranged spouse or parent for a minor child is
- 14 making to the applicant according to the standards of the state
- 15 department, or -pursuant ACCORDING to a court determination, if
- 16 there is -such a COURT determination. Nothing in this section
- 17 shall eliminate— ELIMINATES the responsibility of support
- 18 established in section 76 for cash assistance received under this
- **19** act.