



## Comparison of *Insure Missouri* Proposals: SB1283 (Dempsey), HB2354 (Portwood), HB2398 (Schaaf) and HB2314(Ervin)

March 25, 2008

By Ruth Ehresman, Director of Health and Budgetary Policy

Bill number	Are individuals eligible below 100% of FPL?	Cost sharing requirement for those under 100% of FPL	Are individuals eligible over 200% of FPL?	Cost sharing requirement for those over 100% of FPL	Benefit package	Estimated number of individuals covered	Cost to the state	Bottom line
<b>SB1283 (Dempsey)</b>	Yes. * If between ages of 19-64; is uninsured for 6 months; has earned income over the AFDC limit (\$292/mo for family of 3); is not eligible for employer sponsored insurance; is a citizen and a MO resident for at least 12 months.	The bill is ambiguous about whether individuals with incomes under 100% of FPL must have health savings accounts.  It appears the intent is that they are required, but the language doesn't say this.  <u>There is a cap</u> for individual contribution of 1% of annual income.	Yes. Up to 225% of FPL. Same additional requirements apply as for those below 100% of FPL*.	Individuals must make payments to a \$1,000 health savings account (HSA), less any amount paid by the individual to MO HealthNet, SCHIP, or Medicare <u>OR</u> on a sliding scale based on income, whichever is less.  <u>The cap for individual contribution to the HSA</u> is a sliding scale from 2-5% of annual income. (Note: the sliding fee scale in SB1283 discusses incomes up to	No dental, vision or rehab services. No non-emergency medical transportation nor EPSDT for young parents ages 13 to 21.  Each individuals gets at least \$500 of qualifying preventive care services, at no cost to the individual.  Additional preventive services are subject to deductibles.	Unknown.  Since this proposal is subject to appropriations, the number of participant may be capped.	Unknown	This plan requires a lot of additional administration.  The benefit package is less comprehensive than MO HealthNet.  Some eligibility provisions will need federal permission.  Health Savings Accounts have not been proven to result in better health in low income populations.  The proposed plan may not be affordable for potential participants.  While the fiscal note is not available, Insure Missouri is likely to be more expensive than a

				<p>250% of FPL, but eligibility is set at no higher than 225% of FPL.)</p> <p>The state makes up the difference if the individual share is less than \$1,000.</p> <p><i>An employer may contribute no more than \$500 of this.</i></p> <p>Deductible costs are <u>not</u> capped.</p>				MO HealthNet expansion, especially if small employers who do not currently provide health insurance are given a tax credit for doing so.
<p><b>HB2354 (Portwood)</b>  <b>This is an expansion of MO HealthNet that is structured similar to the Ticket to Work bill passed in 2007</b></p>	<p>**After deductions, <u>net</u> income must not be greater than 85% of FPL. Must be employed; have a temporary disability that doesn't meet the definition of "disabled" under state or federal law; OR be the parent of a minor child; meet asset test met by the permanently and totally disabled under MO HealthNet.</p>	No	<p>To be eligible, gross income may be up to 250% of FPL. Other eligibility criteria as for those with income under 100% of FPL.  **Same additional requirements as those with income below 100% of FPL.</p>	<p>Those with gross income greater than 100% of FPL pay premiums from 4-6% of gross income</p>	Same as MO HealthNet	Unknown	Unknown	<p>The formula for determining eligibility is complicated.</p> <p>By expanding MO HealthNet, it does not require a separate administrative program.</p> <p>Cost sharing would need federal approval</p> <p>Does not include parents or caregivers with unearned income (e.g.. child support)</p>
<p><b>HB2398 (Schaaf)</b></p>	Same as SB1283.***	****Requires health savings accounts for	<p>Yes. Up to 225% of FPL.  ***Same</p>	**** Same as SB1283	Same as SB1283	As in SB1283	As in SB1283	As in SB1283

	It is NOT an entitlement program for individuals under 85% of FPL.	those with income greater than 85% of FPL.  Cap is 1% of income, for individuals with income from 85-100% of FPL	additional requirements as those below 100% of FPL.	Deductible costs are capped at \$2,500				
<b>HB2413 (Ervin)</b>	Same as HB 2398	Requires Health savings accounts for all.  The cap for individual contribution is 1% of income, for individuals with income up to 100% of FPL.  Deductible costs are capped at \$2,500.	Yes. Up to 225% of FPL. Same additional requirements as those below 100% of FPL*.	Same as SB1283, although the amount in the Health savings account can be "\$1000 or <u>higher</u> ".  Deductible costs are capped at \$2,500.  Allows transitional coverage for those with incomes greater than 225% of FPL, but the individual bears the entire cost.	Same as SB1283, except \$300 is available for preventive services.  May include incentives to promote a healthy lifestyle.	As in SB1283	As in SB1283	As in SB1283