

**Second Regular Session  
Seventy-second General Assembly  
STATE OF COLORADO**

**REVISED**

*This Version Includes All Amendments Adopted  
on Second Reading in the Second House*

LLS NO. 20-0562.01 Brita Darling x2241

**SENATE BILL 20-033**

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**SENATE SPONSORSHIP**

**Tate and Fields,** Bridges, Cooke, Crowder, Donovan, Garcia, Gardner, Ginal, Gonzales, Hansen, Hisey, Holbert, Lee, Lundeen, Moreno, Pettersen, Priola, Rankin, Rodriguez, Scott, Smallwood, Sonnenberg, Story, Todd, Winter, Woodward, Zenzinger

**HOUSE SPONSORSHIP**

**Lontine,**

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**Senate Committees**

Health & Human Services  
Finance  
Appropriations

**House Committees**

Public Health Care & Human Services  
Finance  
Appropriations

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**A BILL FOR AN ACT**

101      **CONCERNING ACCESS TO THE MEDICAID BUY-IN PROGRAM FOR**  
102              **CERTAIN WORKING ADULTS WITH DISABILITIES WHO HAVE**  
103              **BECOME INELIGIBLE FOR THE PROGRAM DUE TO AGE, AND, IN**  
104              **CONNECTION THEREWITH, MAKING AN APPROPRIATION.**

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**Bill Summary**

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://leg.colorado.gov>.)*

The bill authorizes working adults with disabilities who are over 65 years of age to continue participating in the existing medicaid buy-in program as a state-funded program, without federal matching money, if,

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.  
*Capital letters or bold & italic numbers indicate new material to be added to existing statute.*  
*Dashes through the words indicate deletions from existing statute.*

HOUSE  
Amended 2nd Reading  
June 8, 2020

SENATE  
3rd Reading Unamended  
March 11, 2020

SENATE  
Amended 2nd Reading  
March 10, 2020

in part, the working adult:

- ! Is enrolled in or has applied for medicare;
- ! Is eligible for and receiving long-term care home- and community-based services or durable medical equipment as part of complex rehabilitative services or has extraordinary medical expenses, as determined by rule of the state board, that are not covered by medicare;
- ! Except as specified in the bill, was continuously enrolled in and receiving services through the medicaid buy-in program for at least one year immediately prior to attaining 65 years of age; and
- ! Continues to meet the work requirements for the medicaid buy-in program.

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1 *Be it enacted by the General Assembly of the State of Colorado:*

2 **SECTION 1. In Colorado Revised Statutes, 25.5-6-1402, add (6)**  
3 **as follows:**

4 **25.5-6-1402. Definitions. As used in this part 14, unless the**  
5 **context otherwise requires:**

6 **(6) "WORK INCENTIVES ELIGIBILITY GROUP" MEANS THE**  
7 **CATEGORY OF ELIGIBILITY UNDER THE FEDERAL "BALANCED BUDGET ACT**  
8 **OF 1997", PUB.L. 105-33, 111, AS AMENDED, FOR INDIVIDUALS WITH A**  
9 **DISABILITY WHO, EXCEPT FOR ASSETS OR INCOME, WOULD BE ELIGIBLE FOR**  
10 **THE SUPPLEMENTAL SECURITY INCOME PROGRAM. THIS ELIGIBILITY**  
11 **APPLIES TO INDIVIDUALS WHO ARE SIXTY-FIVE YEARS OF AGE OR OLDER.**

12 **SECTION 2. In Colorado Revised Statutes, 25.5-6-1403, add (5)**  
13 **as follows:**

14 **25.5-6-1403. Waivers and amendments. (5) (a) EXCEPT AS**  
15 **PROVIDED IN SUBSECTION (5)(b) OF THIS SECTION:**

16 **(I) THE STATE DEPARTMENT SHALL SEEK FEDERAL AUTHORIZATION**  
17 **THROUGH AN AMENDMENT TO THE STATE MEDICAL ASSISTANCE PLAN TO**  
18 **IMPLEMENT THE FEDERAL "BALANCED BUDGET ACT OF 1997", PUB.L.**

1 105-33, 111, AS AMENDED, WHICH PROVIDES INDIVIDUALS AN  
2 OPPORTUNITY TO BUY INTO MEDICAID CONSISTENT WITH THE FEDERAL  
3 "SOCIAL SECURITY ACT", 42 U.S.C. SEC. 1396a (a)(10)(A)(ii)(XIII), AS  
4 AMENDED, TO PERMIT THE STATE DEPARTMENT TO PROVIDE MEDICAL  
5 ASSISTANCE ELIGIBILITY TO INDIVIDUALS IN THE WORK INCENTIVES  
6 ELIGIBILITY GROUP, AGE SIXTY-FIVE AND OLDER, AFTER THEY ARE NO  
7 LONGER ELIGIBLE UNDER THE FEDERAL "TICKET TO WORK AND WORK  
8 INCENTIVES IMPROVEMENT ACT OF 1999", PUB.L. 106-170.

9 (II) IN ADDITION TO SUBMITTING AN AMENDMENT TO THE STATE  
10 MEDICAL ASSISTANCE PLAN PURSUANT TO SUBSECTION (5)(a)(I) OF THIS  
11 SECTION, THE STATE DEPARTMENT SHALL SUBMIT A STATE PLAN  
12 AMENDMENT PURSUANT TO SECTION 1902(r)(2) OF THE FEDERAL "SOCIAL  
13 SECURITY ACT" TO USE LESS RESTRICTIVE INCOME AND RESOURCE  
14 METHODOLOGIES TO MATCH THE INCOME, HOUSEHOLD, AND ASSET LEVELS  
15 OF THE MEDICAID BUY-IN PROGRAM FOR IMPLEMENTATION NO LATER THAN  
16 JULY 1, 2022.

17 (b) THE STATE DEPARTMENT SHALL NOT PREPARE AND SUBMIT THE  
18 AMENDMENTS TO THE STATE MEDICAL ASSISTANCE PLAN PURSUANT TO  
19 THIS SUBSECTION (5) IF THERE ARE INSUFFICIENT REVENUES FROM THE  
20 HEALTHCARE AFFORDABILITY AND SUSTAINABILITY FEE CASH FUND,  
21 CREATED IN SECTION 25.5-4-402.4, FOR THE ADMINISTRATIVE EXPENSES  
22 ASSOCIATED WITH PREPARING AND SUBMITTING THE STATE PLAN  
23 AMENDMENTS. IF THERE ARE INSUFFICIENT REVENUES FROM THE  
24 HEALTHCARE AFFORDABILITY AND SUSTAINABILITY FEE CASH FUND, THE  
25 STATE DEPARTMENT MAY ACCEPT AND EXPEND GIFTS, GRANTS, OR  
26 DONATIONS FOR THIS PURPOSE.

27 **SECTION 3. In Colorado Revised Statutes, 25.5-6-1404, amend**

1 (1)(a); and repeal (4) as follows:

2 25.5-6-1404. Medicaid buy-in program - eligibility - premiums  
3 - medicaid buy-in cash fund - report. (1) Eligibility. An individual is  
4 eligible for and shall receive medicaid provided in this part 14 through a  
5 medicaid buy-in program without losing eligibility for medicaid if all of  
6 the following conditions are met:

7 (a) The individual meets the requirements for the basic coverage  
8 group or the individual was previously in the basic coverage group and  
9 now meets the requirements for the medical improvement group, OR THE  
10 INDIVIDUAL WAS PREVIOUSLY IN THE BASIC COVERAGE GROUP AND NOW  
11 MEETS THE REQUIREMENTS FOR THE WORK INCENTIVES ELIGIBILITY  
12 GROUP, IF A STATE PLAN AMENDMENT FOR THE WORK INCENTIVES  
13 ELIGIBILITY GROUP HAS BEEN SUBMITTED AND APPROVED PURSUANT TO  
14 SECTION 25.5-6-1403 (5);

15 (4) Private health insurance. (a) The state department shall, on  
16 behalf of an individual who is eligible for medicaid under subsection (1)  
17 of this section, pay premiums for or purchase individual coverage offered  
18 by the individual's employer if the state department determines that  
19 paying the premiums or purchasing the coverage will be less than  
20 providing medicaid coverage. Any employer-sponsored health insurance  
21 plan shall be the primary payer, and any payments made under medicaid  
22 shall be secondary. In the event that the employer-sponsored health  
23 insurance plan provides benefits that are not equivalent to the benefits  
24 provided under medicaid, medicaid shall provide all additional benefits  
25 that are not provided by the employer-sponsored health insurance plan.

26 (b) If an individual is eligible for medicaid under subsection (1)  
27 of this section and the individual's employer would pay for all or a portion

1 of the individual's private insurance, the state department may accept  
2 contributions from the individual's employer to offset part of the cost of  
3 providing services pursuant to this section.

4 **SECTION 4.** In Colorado Revised Statutes, 25.5-6-1405, amend  
5 (2) as follows:

6 **25.5-6-1405. Rule-making authority.** (2) Any rules adopted by  
7 the state board shall be MUST consistent with the federal "Ticket to Work  
8 and Work Incentives Improvement Act of 1999", Pub.L. 106-170, AND  
9 THE "BALANCED BUDGET ACT OF 1997", PUB.L. 105-33, 111, AS  
10 AMENDED.

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14 **SECTION 5. Appropriation.** (1) For the 2020-21 state fiscal  
15 year, \$50,000 is appropriated to the department of health care policy and  
16 financing for use by the executive director's office. This appropriation is  
17 from the general fund. To implement this act, the department may use this  
18 appropriation for general professional services and special projects.

19 (2) For the 2020-21 state fiscal year, the general assembly  
20 anticipates that the department of health care policy and financing will  
21 receive \$50,000 in federal funds to implement this act. The appropriation  
22 in subsection (1) of this section is based on the assumption that the  
23 department will receive this amount of federal funds, which is subject to  
24 the "(I)" notation as defined in the annual general appropriation act for the  
25 same fiscal year.

26 **SECTION 6. Safety clause.** The general assembly hereby finds,

- 1 determines, and declares that this act is necessary for the immediate
- 2 preservation of the public peace, health, or safety.