RN1620829 **AP 14**

**INTRODUCED BY SENIOR ASSEMBLY MEMBER PURCELL**

Legislative Counsel’s Digest

AP 14: MEDI-CAL: RESOURCE LIMITS: MOTOR VEHICLES.

UNDER EXISTING LAW, THE FEDERAL MEDICAID PROGRAM IS ADMINISTERED BY EACH STATE TO PROVIDE QUALIFIED LOW-INCOME PERSONS WITH HEALTH CARE SERVICES. IN CALIFORNIA, THE FEDERAL MEDICAID PROGRAM IS ADMINISTERED BY THE STATE DEPARTMENT OF HEALTH CARE SERVICES THROUGH THE MEDI-CAL PROGRAM. WITH RESPECT TO CERTAIN POPULATIONS, EXISTING LAW ESTABLISHES ELIGIBILITY CRITERIA FOR THE MEDI-CAL PROGRAM THAT INCLUDE BOTH INCOME AND RESOURCE REQUIREMENTS. WITH RESPECT TO THOSE POPULATIONS, EXISTING REGULATIONS PROVIDE THAT WHEN COUNTING AN INDIVIDUAL’S RESOURCES, AN INDIVIDUAL IS ENTITLED TO HAVE ONE QUALIFIED MOTOR VEHICLE CONSIDERED EXEMPT.

THIS MEASURE WOULD MEMORIALIZE THE LEGISLATURE AND THE GOVERNOR TO ENACT LEGISLATION THAT WOULD ENSURE THAT, WITH RESPECT TO THE POPULATIONS SUBJECT TO THE MEDI-CAL INCOME AND RESOURCE REQUIREMENTS, HOUSEHOLDS WITH 2 MOTOR VEHICLES MAY HAVE BOTH OF THOSE VEHICLES EXEMPT FOR PURPOSES OF DETERMINING THEIR ELIGIBILITY FOR SERVICES UNDER THE MEDI-CAL PROGRAM.

VOTE MAJORITY.

AP 14: RELATING TO MEDI-CAL ELIGIBILITY

WHEREAS, FEDERAL HEALTH CARE REFORM UNDER THE FEDERAL PATIENT PROTECTION AND AFFORDABLE CARE ACT REQUIRES THAT INCOME ELIGIBILITY FOR MEDICAID FOR MOST POPULATIONS BE BASED ON A TAX-BASED SYSTEM FOR COUNTING INDIVIDUAL AND HOUSEHOLD INCOME CALLED MODIFIED ADJUSTED GROSS INCOME (MAGI); AND

WHEREAS, UNDER THE FEDERAL PATIENT PROTECTION AND AFFORDABLE CARE ACT, STATES ARE NOT PERMITTED TO USE ASSETS TESTS TO DETERMINE ELIGIBILITY FOR MOST MEDICAID POPULATIONS; AND

WHEREAS, HOWEVER, CERTAIN POPULATIONS WILL REMAIN SUBJECT TO THE INCOME AND ASSETS TEST USED PRIOR TO THE FEDERAL PATIENT PROTECTION AND AFFORDABLE CARE ACT, INCLUDING INDIVIDUALS WHO ARE 65 YEARS OF AGE OR OLDER, MEDICALLY NEEDY INDIVIDUALS, AND PEOPLE WITH A DISABILITY; AND

WHEREAS, IN CALIFORNIA, THE INCOME LIMITATION ON ELIGIBILITY FOR MEDI-CAL FOR THE POPULATIONS EXEMPT FROM THE NEW MAGI RULES HAS NOT CHANGED IN A NUMBER OF YEARS, BUT THE COST OF LIVING HAS CONTINUED TO INCREASE; AND

WHEREAS, INDIVIDUALS OVER 65 YEARS OF AGE INCREASINGLY HAVE TO CONTINUE TO WORK IN ORDER TO MAKE ENDS MEET; AND

WHEREAS, HOUSEHOLDS ARE IN NEED OF TWO CARS SO THAT EACH INDIVIDUAL CAN GO TO WORK; AND

WHEREAS, INDIVIDUALS IN THOSE POPULATIONS WHO HAVE AN INCOME OVER A SET AMOUNT AND HAVE SUPPORTED OTHER PERSONS IN NEED OF HEALTH CARE ARE NOW UNABLE TO AFFORD THEIR OWN HEALTH CARE; AND

WHEREAS, THERE IS A LARGE PORTION OF INDIVIDUALS OVER 65 YEARS OF AGE WHO WORK PART TIME BECAUSE THEIR HOURS HAVE BEEN REDUCED AND WHO MAY LOSE THEIR HOMES BECAUSE OF LARGE CREDIT CARD DEBT DUE TO HEALTH CARE PAYMENTS; AND

WHEREAS, BETWEEN 57,000,000 AND 63,000,000 INDIVIDUALS USE EMERGENCY SERVICES IN HOSPITALS AND, IN MANY CASES, THOSE INDIVIDUALS OVER 65 YEARS OF AGE ARE DYING BECAUSE OF LACK OF HEALTH CARE; AND

WHEREAS, UNINSURED INDIVIDUALS WITH SERIOUS MEDICAL CONDITIONS ARE ADMITTED TO THE EMERGENCY DEPARTMENTS OF HOSPITALS REGARDLESS OF THEIR INSURANCE STATUS, AND THIS IS CAUSING MORE SERIOUS ILLNESS AND COSTING MUCH MORE MONEY THAN PREVENTION; AND

WHEREAS, PREVENTATIVE CARE SAVES TAX DOLLARS IN THE LONG-TERM AND SAVES LIVES; AND

WHEREAS, IT WAS REPORTED IN THE NEW ENGLAND JOURNAL OF MEDICINE THAT UNPLANNED ADMITTANCES OR HOSPITALIZATIONS OF UNINSURED INDIVIDUALS COSTS AN ESTIMATED $17,450,000,000 EACH YEAR, AND THAT IS A GREAT WASTE OF TAXPAYER MONEY; AND

WHEREAS, MANY INDIVIDUALS ARE INELIGIBLE FOR MEDI-CAL BECAUSE THEY HAVE TWO CARS, EVEN IF ONE OF THOSE CARS IS THE HOUSEHOLD MOTOR VEHICLE AND THE OTHER IS NEEDED TO ENSURE THAT A HOUSEHOLD MEMBER CAN GO TO WORK OR TO TRANSPORT GRANDCHILDREN TO SCHOOL; AND

WHEREAS, ANY ADDITIONAL COST TO THE STATE BY ALLOWING INDIVIDUALS ENROLLED IN MEDI-CAL TO HAVE MORE THAN ONE MOTOR VEHICLE WOULD BE OFFSET BY OTHER SAVINGS, AND IT HELPS THOSE INDIVIDUALS TO FIND JOBS OR TAKE CHILDREN TO DAY CARE OR SCHOOL OR TO SEEK MEDICAL TREATMENT; AND

WHEREAS, THIS EXEMPTION OF TWO MOTOR VEHICLES WOULD SAVE THE STATE BILLIONS OF DOLLARS IN HOSPITAL CARE AND TREATMENT AND WOULD SAVE $1,000,000 JUST FOR ONE INDIVIDUAL’S HOSPITALIZATION AND TREATMENT; AND

WHEREAS, THE LONGER THE DELAY IN MEDICAL TREATMENT, THE GREATER THE COST, IN ADDITION TO THE LOSS THE OTHER PERSON WOULD BE SUFFERING; NOW, THEREFORE, BE IT

RESOLVED, BY THE SENIOR ASSEMBLY AND THE SENIOR SENATE, JOINTLY, THAT THE SENIOR LEGISLATURE OF THE STATE OF CALIFORNIA AT ITS 2016 REGULAR SESSION, A MAJORITY OF THE MEMBERS VOTING THEREFOR, HEREBY PROPOSES THAT, WITH RESPECT TO POPULATIONS THAT ARE NOT SUBJECT TO NEW INCOME RULES UNDER THE FEDERAL PATIENT PROTECTION AND AFFORDABLE CARE ACT, HOUSEHOLDS WITH TWO MOTOR VEHICLES MAY HAVE BOTH OF THOSE VEHICLES EXEMPT FOR PURPOSES OF DETERMINING THEIR ELIGIBILITY FOR SERVICES UNDER THE MEDI-CAL PROGRAM IF ONE MOTOR VEHICLE IS USED FOR WORK AND THE OTHER MOTOR VEHICLE IS THE FAMILY CAR; AND BE IT FURTHER

RESOLVED, THAT THE SENIOR LEGISLATURE OF THE STATE OF CALIFORNIA RESPECTFULLY MEMORIALIZES THE LEGISLATURE AND THE GOVERNOR TO ENACT APPROPRIATE LEGISLATION THAT WOULD ADDRESS THE CONCERNS SET FORTH IN THIS MEASURE; AND BE IT FURTHER

RESOLVED, THAT A COPY OF THIS MEASURE BE TRANSMITTED TO THE SPEAKER OF THE ASSEMBLY, THE PRESIDENT PRO TEMPORE OF THE SENATE, AND THE GOVERNOR OF THE STATE OF CALIFORNIA.