

# ASSEMBLY, No. 3273

## STATE OF NEW JERSEY 214th LEGISLATURE

INTRODUCED SEPTEMBER 30, 2010

**Sponsored by:**

**Assemblywoman VALERIE VAINIERI HUTTLE**

**District 37 (Bergen)**

**Assemblywoman LINDA R. GREENSTEIN**

**District 14 (Mercer and Middlesex)**

**Assemblywoman CELESTE M. RILEY**

**District 3 (Salem, Cumberland and Gloucester)**

**Assemblywoman PAMELA R. LAMPITT**

**District 6 (Camden)**

**Assemblywoman LINDA STENDER**

**District 22 (Middlesex, Somerset and Union)**

**Co-Sponsored by:**

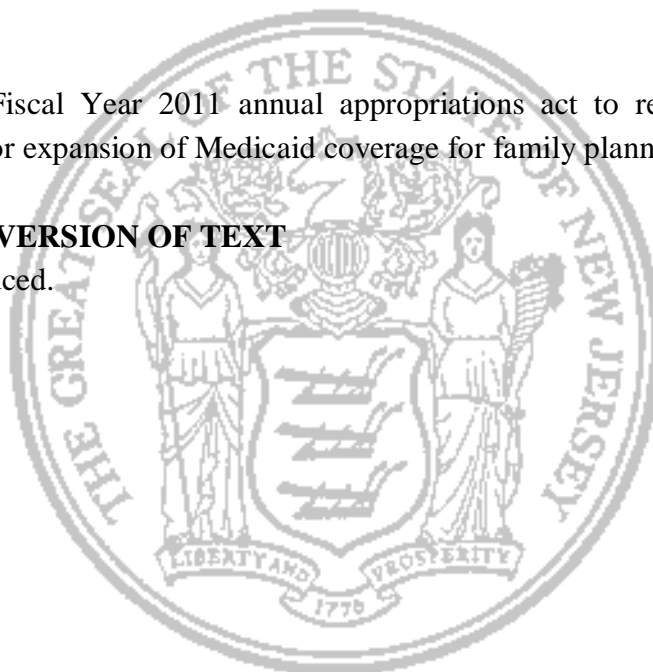
**Assemblyman O'Donnell, Assemblywoman Tucker, Assemblyman Diegnan, Assemblywomen Spencer, Jasey, Senators Weinberg, Sarlo, Vitale, Gordon and Norcross**

**SYNOPSIS**

Amends Fiscal Year 2011 annual appropriations act to require filing of application for expansion of Medicaid coverage for family planning services.

**CURRENT VERSION OF TEXT**

As introduced.



**(Sponsorship Updated As Of: 12/21/2010)**

1 AN ACT amending the Fiscal Year 2011 annual appropriations act,  
2 P.L.2010, c.35.

3

4 **BE IT ENACTED** by the Senate and the General Assembly of the  
5 State of New Jersey:

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7 1. The following language provisions in section 1 of P.L.2010,  
8 c.35, the annual appropriations act for State fiscal year 2011, are  
9 amended to read as follows:

**54 DEPARTMENT OF HUMAN SERVICES**

*20 Physical and Mental Health*

*24 Special Health Services*

*7540 Division of Medical Assistance and Health Services*

**DIRECT STATE SERVICES**

10 The amounts hereinabove appropriated for Health Services  
11 Administration and Management that are unexpended on the 60<sup>th</sup>  
12 day following the date of enactment of P.L. , c. (C. )  
13 (pending before the Legislature as this bill) shall be conditioned  
14 upon the following: the Department of Human Services shall,  
15 within 60 days of the date of enactment of P.L. , c. (C. )  
16 (pending before the Legislature as this bill), a. submit a State  
17 Plan Amendment to the federal Centers for Medicare and  
18 Medicaid Services to implement the Medicaid state option to  
19 expand Medicaid coverage for family planning services to  
20 individuals whose income is up to 200% of the federal poverty  
21 level; b. in conjunction with the Department of Health and  
22 Senior Services, the Department of Children and Families, and  
23 the Office of Management and Budget, aggregate all the amounts  
24 appropriated to be spent in fiscal year 2010-2011 in various  
25 accounts for family planning services to individuals whose  
26 income is more than 133% but not more than 200% of the federal  
27 poverty level and shall place them in a single special account  
28 whose balances shall be used as matching funds when submitting  
29 the State Plan Amendment; and c. in conjunction with the  
30 Department of Health and Senior Services, the Department of  
31 Children and Families, and the Office of Management and  
32 Budget, file with the Legislature, pursuant to section 2 of  
33 P.L.1991, c.164 (C.52:14-19.1), a report detailing all the  
34 amounts the State spent in fiscal year 2009-2010 in various  
35 accounts on family planning services to individuals whose  
36 income is more than 133% but not more than 200% of the federal  
37 poverty level and detailing the amounts the State appropriated  
38 therefor in fiscal year 2010-2011.

39 (cf: P.L.2010, c.35, s.1)

40

41 2. This act shall take effect immediately.

**EXPLANATION** – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

## STATEMENT

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This bill seeks to expand the availability of family planning services under the Medicaid program in State fiscal year 2010-2011. Specifically, the legislation requires the State to submit the necessary application to the federal government so that the State's Medicaid program can offer family planning services to individuals with incomes of up to 200 percent of the federal poverty level rather than only to individuals meeting the income cap of up to 133 percent of the federal poverty level under the current State plan. If within 60 days of the bill's date of enactment the State fails to apply for a permission to expand coverage, the bill eliminates the unexpended State fiscal year 2010-2011 Direct State Services appropriation for the Division of Medical Assistance and Health Services in the Department of Human Services.

The bill thus mandates that the State take advantage of a provision in the recently enacted federal health care reform law that created a state option to provide Medicaid coverage for family planning services to individuals with income up to 200 percent of the federal poverty level. States exercising the state option will receive \$9 in federal reimbursement for every \$1 they spend for family planning services.

Prior to passage of the federal health care reform law, states that sought to expand family planning services to additional low-income individuals were required to apply for and obtain a Medicaid waiver. The waiver, however, was difficult to secure, was only valid for a limited number of years, and had to be renewed periodically. New Jersey has sought such a waiver in the past but the federal government has never approved the State's request.

The bill also requires that the Department of Human Services file a report with the State Legislature indicating the amounts the State spent in fiscal year 2009-2010 for family planning services to individuals whose income is more than 133% but not more than 200% of the federal poverty level, and the amounts the State appropriated therefor in fiscal year 2010-2011. If the report is not provided within 60 days of the bill's date of enactment, the bill eliminates the unexpended State fiscal year 2010-2011 Direct State Services appropriation for the Division of Medical Assistance and Health Services in the Department of Human Services.

Family planning services include information and counseling on reproductive choices and birth control methods; comprehensive physicals and health screenings; pelvic and breast exams; pregnancy testing; the diagnosis and treatment of sexually transmitted diseases; AIDS testing and counseling; prenatal substance abuse programs; colposcopy, cryotherapy, and loop electrosurgical excision procedures; and adolescent risk reduction counseling.