## ARKANSAS SENATE

83rd General Assembly - Regular Session, 2001

Amendment Form

## Subtitle of Senate Bill No. 932

Amendment No. 1 to Senate Bill No. 932.

Amend Senate Bill No. 932 as originally introduced:

Add Senators Fitch, Gwatney, Hill, D. Malone, P. Malone, Critcher, Miller, K. Smith, Bryles, Jeffress, T. Smith, Hoofman, Wooldridge, Simes, Wilkins, Faris, Cash, Horn, Mahony, Wilkinson, Riggs, Walker, Everett, Argue, Trusty, Delay, Brown as co-sponsors of the bill.

AND

Delete the Title and substitute the following:

"AN ACT TO IMPROVE ACCESS TO AFFORDABLE PRESCRIPTION DRUGS FOR PERSONS OVER AGE 65; AND FOR OTHER PURPOSES."

AND

Delete the Subtitle and substitute the following:

"AN ACT TO IMPROVE ACCESS TO AFFORDABLE PRESCRIPTION DRUGS FOR PERSONS OVER 65."

AND

Delete everything after the Enacting clause and substitute the following:

"SECTION 1. Arkansas Code Title 20, Chapter 77, is amended to add the following additional subchapter:

 $\underline{20-77-1401}$ . This subchapter shall be known and may be cited as the "Prescription Drug Access Improvement Act".

<u>20-77-1402.</u> The purpose and intent of this subchapter is to authorize a Medicaid waiver to provide affordable prescription drugs for eligible persons age sixty-five (65) and over.

20-77-1403. As used in this subchapter:

(1) "Department" means the Department of Human Services;

- (2) "Medicaid" means the Arkansas program of medical assistance established under Title XIX of the Social Security Act;
- (3) "Prescription Drug Access Program" means the limited prescription drug benefit Medicaid waiver program established under this subchapter;
- (4) "Prescription drugs" means controlled substances and legend drugs as defined in Arkansas Code 20-64-503; and
- (5) "Waiver" means the limited prescription drug benefit Medicaid wai ver authorized by this subchapter.
- 20-77-1404. The Department of Human Services may apply to the Health Care Financing Administration for a limited prescription drug benefit Medicaid waiver for persons who:
  - (1) Are age sixty-five (65) or over;
  - (2) Have no prescription drug coverage; and
- (3) Have incomes and resources at or below the income and resource Qualified Medicare Beneficiary (QMB) eligibility standards established by the department.
- 20-77-1405. Any waiver application submitted by the Department of Human Services shall include provisions for the department to:
  - (1)(A) Establish an income eligibility standard not to exceed:
- (i) Eighty per cent (80%) of the federal poverty guideline for the period July 1, 2001 through June 30, 2002;
- (ii) Ninety percent (90%) of the federal poverty guideline for the period July 1, 2002 through June 30, 2003; and
- (iii) One-hundred percent (100%) of the federal poverty quideline after June 30, 2003.
- (B) Postpone or abolish any increases to the income eligibility standards if program costs exceed projections or adequate funding is unavai I abl e;
- (2) Require qualified residents to pay an annual enrollment fee of twenty-five dollars (\$25.00) during the biennium beginning July 1, 2001;
- (3) Have authority to amend the qualified resident enrollment fee by rule beginning July 1, 2003, provided that qualified resident enrollment fee increases may not exceed fifteen percent (15%) during any state fiscal year;
- (4) Establish co-payments of ten dollars (\$10.00) for generic drugs and twenty dollars (\$20.00) for name brand drugs;
- (5) Determine eligibility for limited prescription drug benefits under the waiver;
- (6) <u>Limit prescription drug benefits und</u>er the waiver to two (2)

<u>prescriptions per</u>	<u>person per month; and</u>			
(7) Provi de	e limited prescription	drug benef	fits only ir	accordance with
an approved waive	r from the Health Care	Fi nanci ng	Admi ni strat	i on. "
The Amendment was read	the first time, rules suspended and	l road the second	time and	
By: Senator P. Malone	the first time, rules suspended and	reau the second	time and	
MF/RTK - 040320011458				
RTK418				Secretary