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## MICHIGAN CARING PROGRAM

House Bill 4659

Sponsor: Rep. Teola P. Hunter

House Bill 4660

Sponsor: Rep. Michael E. Nye

Committee: Insurance

Complete to 5-22-91

## A SUMMARY OF HOUSE BILLS 4659 AND 4660 AS INTRODUCED 3-27-91

House Bill 4659 would amend the Nonprofit Health Care Corporation Reform Act, which regulates Blue Cross and Blue Shield of Michigan, to allow the creation of a "Michigan Caring Program," which would provide primary health care coverage for children without charge. The program would be funded by private donations and public grants, and the health care corporation could provide administrative services to the program free of charge. House Bill 4660 would amend the same act to allow the corporation to enter into special participating contracts with health care providers for the provision of primary health care benefits to children enrolled in the Michigan Caring Program. It also says the program would be considered a group for the purpose of establishing rates. House Bill 4660 is tiebarred to House Bill 4659.

Under House Bill 4659, a child residing in the state would be eligible to enroll in the program if he or she: was under 19 years old; was unmarried; resided in a household with an income 200 percent or less of the federal poverty level; was ineligible for Medicaid; had no other health care coverage available; and enrolled in the program with all other eligible siblings who had no other health care coverage available. Children would be enrolled dependent upon funding on a first-come, first-served basis and without regard to health status.

Blue Cross and Blue Shield could limit the benefits furnished to a child enrolled in the program to the following: doctor office visits for a sick child; medically necessary outpatient diagnostic tests; emergency medical and accident care in a doctor's office or hospital's emergency room; medically necessary outpatient surgery and anesthesia; preventive care, including immunizations and well-child visits to a doctor's office; and outpatient substance abuse care. With approval of the insurance commissioner, the corporation could provide other health care benefits. If prescription drug benefits were offered, a co-pay not to exceed \$3 could be charged. (Otherwise, no fee could be charged for benefits.)

MCL 550.1435 et al.