

House \_\_\_\_\_ Amendment NO. \_\_\_\_\_

Offered By

1 AMEND Senate Bill No. 887, Page 1, In the Title, Line 3, by deleting the words "directives registry"; and  
2  
3 Further amend said bill, Page 3, Section 194.600, Line 60, by inserting after all of said section and line the  
4 following:

5  
6 "208.952. 1. There is hereby established [the] a permanent "Joint Committee on [MO HealthNet]  
7 Public Assistance". The committee shall have [as its purpose the study of] the following purposes:

8 (1) Studying, monitoring, and reviewing the efficacy of the public assistance programs within the  
9 state;

10 (2) Determining the level and adequacy of resources needed [to continue and improve the MO  
11 HealthNet program over time] for the public assistance programs within the state; and

12 (3) Developing recommendations to the general assembly on the public assistance programs within  
13 the state and promoting independence from safety-net programs among recipients as may be appropriate.

14  
15 The committee shall receive and obtain information from the departments of social services, mental health,  
16 health and senior services, and elementary and secondary education, and any other department as applicable,  
17 regarding the public assistance programs within the state including, but not limited to, MO HealthNet,  
18 supplemental nutrition assistance program (SNAP), and temporary assistance for needy families (TANF).  
19 Such information shall include projected enrollment growth, budgetary matters, trends in childhood poverty  
20 and hunger, and any other information deemed to be relevant to the committee's purpose.

21 2. The directors of the departments of social services, mental health, and health and senior services  
22 shall each submit an annual written report to the committee providing data and statistical information  
23 regarding the caseloads of the department's employees involved in the administration of public assistance  
24 programs.

25 3. The committee shall consist of [ten] ~~twelve~~ members:

26 (1) The chair and the ranking minority member of the house committee on the budget;

27 (2) The chair and the ranking minority member of the senate committee on appropriations  
28 [committee];

29 (3) The chair and the ranking minority member of the house committee on appropriations [for  
30 health, mental health, and social services] designated to consider public assistance legislation and matters;

31 (4) The chair and the ranking minority member of the standing senate committee [on health and  
32 mental health] designated to consider public assistance legislation and matters;

33 (5) The chair and the ranking minority member of the standing house committee designated to  
34 consider public assistance legislation and matters;

35 (6) A representative chosen by the speaker of the house of representatives; and

36 [(6)] (7) A senator chosen by the president pro [tem] tempore of the senate.

37  
38 No more than [three] four members from each house shall be of the same political party.

39 [2.] 4. A chair of the committee shall be selected by the members of the committee.

Standing Action Taken \_\_\_\_\_ Date \_\_\_\_\_

Select Action Taken \_\_\_\_\_ Date \_\_\_\_\_

1           [3.] 5. The committee shall meet [as necessary] at least twice a year. A portion of the meeting shall  
2 be set aside for the purpose of receiving public testimony. The committee shall seek recommendations from  
3 social, economic, and public assistance experts on ways to improve the effectiveness of public assistance  
4 programs, to improve program efficiency and reduce costs, and to promote self-sufficiency among public  
5 assistance recipients as may be appropriate.

6           [4. Nothing in this section shall be construed as authorizing the committee to hire employees or  
7 enter into any employment contracts.

8           5. The committee shall receive and study the five-year rolling MO HealthNet budget forecast issued  
9 annually by the legislative budget office.]

10          6. The committee is authorized to hire staff and enter into employment contracts including, but not  
11 limited to, an executive director to conduct special reviews or investigations of the public assistance  
12 programs within the state in order to assist the committee with its duties. Staff appointments shall be  
13 approved by the president pro tempore of the senate and the speaker of the house of representatives. The  
14 compensation of committee staff and the expenses of the committee shall be paid from the joint contingent  
15 fund or jointly from the senate and house contingent funds until an appropriation is made therefor.

16          7. The committee shall annually conduct a rolling five-year forecast of the public assistance  
17 programs within the state and make recommendations in a report to the general assembly by January first  
18 each year, beginning in [2008] 2018, on anticipated growth [in the MO HealthNet program] of the public  
19 assistance programs within the state, needed improvements, anticipated needed appropriations, and suggested  
20 strategies on ways to structure the state budget in order to satisfy the future needs of [the program] such  
21 programs.

22          [208.985. 1. Pursuant to section 33.803, by January 1, 2008, and each January first  
23 thereafter, the legislative budget office shall annually conduct a rolling five-year MO  
24 HealthNet forecast. The forecast shall be issued to the general assembly, the governor, the  
25 joint committee on MO HealthNet, and the oversight committee established in section  
26 208.955. The forecast shall include, but not be limited to, the following, with additional  
27 items as determined by the legislative budget office:

28          (1) The projected budget of the entire MO HealthNet program;

29          (2) The projected budgets of selected programs within MO HealthNet;

30          (3) Projected MO HealthNet enrollment growth, categorized by population and geographic  
31 area;

32          (4) Projected required reimbursement rates for MO HealthNet providers; and

33          (5) Projected financial need going forward.

34          2. In preparing the forecast required in subsection 1 of this section, where the MO HealthNet program  
35 overlaps more than one department or agency, the legislative budget office may provide for review and  
36 investigation of the program or service level on an interagency or interdepartmental basis in an effort to  
37 review all aspects of the program.]" ; and

38  
39 Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.